

UPMC Dental *Advantage*

Dental OnLine Training Manual

Version 1_112010

UPMC Dental Advantage

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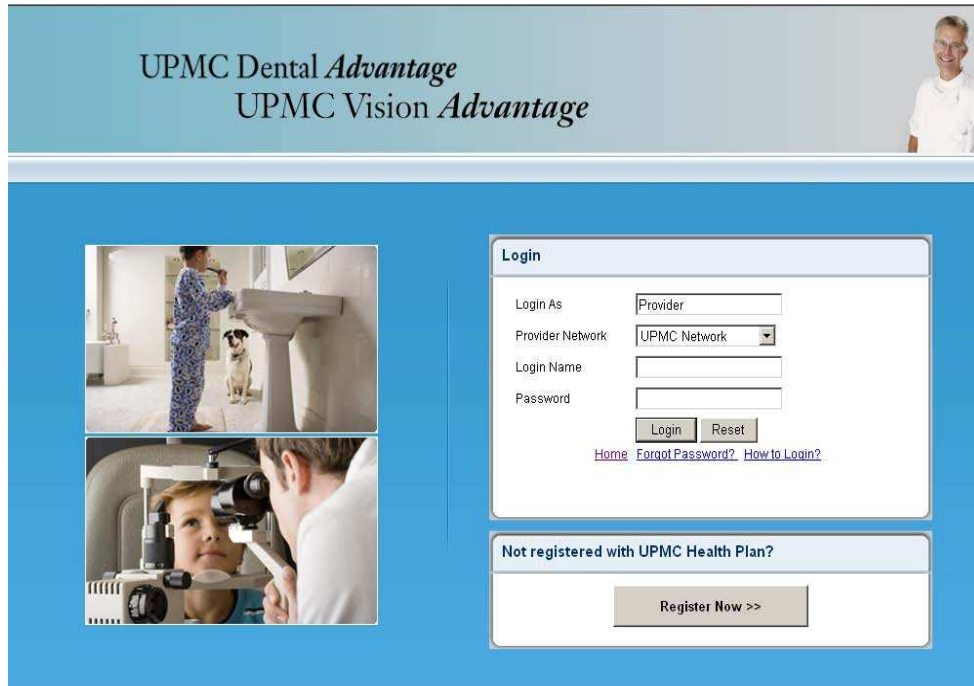
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Dental OnLine provides comprehensive data security with Secure Socket Layer (SSL), Windows Authentication, Login Management (username and password), Access Rights Allocation, and more, thus allowing only authorized users to access the application information.

How to Log in – by Dentist

Dentists will access the UPMC website at www.upmchealthplan.com and click on the link **Are you a Dentist?** to be directed to the UPMC Dental *Advantage* login screen.

The screenshot displays the UPMC Health Plan website. At the top, the UPMC Health Plan logo is on the left, and a Google Custom Search bar is on the right. Below the logo is a large banner image of a smiling woman and a male dentist in a blue surgical cap. A navigation bar below the banner contains links for MEMBERS, PROVIDERS, EMPLOYERS, BROKERS, and HEALTH & WELLNESS. The main content area features a 'GET A QUOTE' section with three buttons: 'Are you an employer?' (GROUP QUOTE), 'Are you 65 or older?' (UPMC for Life), and 'Are you an individual?' (SHORT-TERM QUOTE). To the right is a 'MEMBER LOGIN' section with a text input for 'Enter your User ID here', a 'LOGIN' button, and links for 'Login instructions', 'Forgot your User ID?', 'New User Registration', and 'Secure online features and tools'. Below the quote section are three boxes: 'Are you a Dentist considering the UPMC Dental Advantage Network?', 'Are you a Vision Care Provider considering the UPMC Vision Advantage Network?', and 'Are you an Employee deciding on health insurance?'. To the right of these is a 'Health Care Reform Information' section with an image of the US Capitol dome. At the bottom right are links for 'FIND A DOCTOR', 'Rx INFORMATION', and 'eNEWSLETTERS'. The footer contains three columns: 'PROVIDERS' (News & Announcements, Rx Prior Authorization Forms, Covered medications (formularies), Policies & Procedures, Medicare PFFS Terms & Conditions, Provider OnLine), 'EMPLOYERS' (Health Plan Options for employers, Spending Account Services, Health & Productivity Solutions, E — our all-electronic option, MyHealth monthly, Print-Post-Promote™ package), and 'MEMBERS' (Discounted Tickets to Vatican Splendors, 2010-11 Flu Season Information, Our health insurance plans, UPMC for Life Medicare Plans, Prescription drug information).

Sign-on screen to log in for the first time or as a returning user

To register as a new user, select the Register Now button and then follow the additional steps on the next page under: **Begin registration if your SSN is not in the system.**

Returning or authorized users take the following steps:

- Enter your login name.
- Enter your password. (Note: Passwords are case-sensitive.)
- Click the Login button.

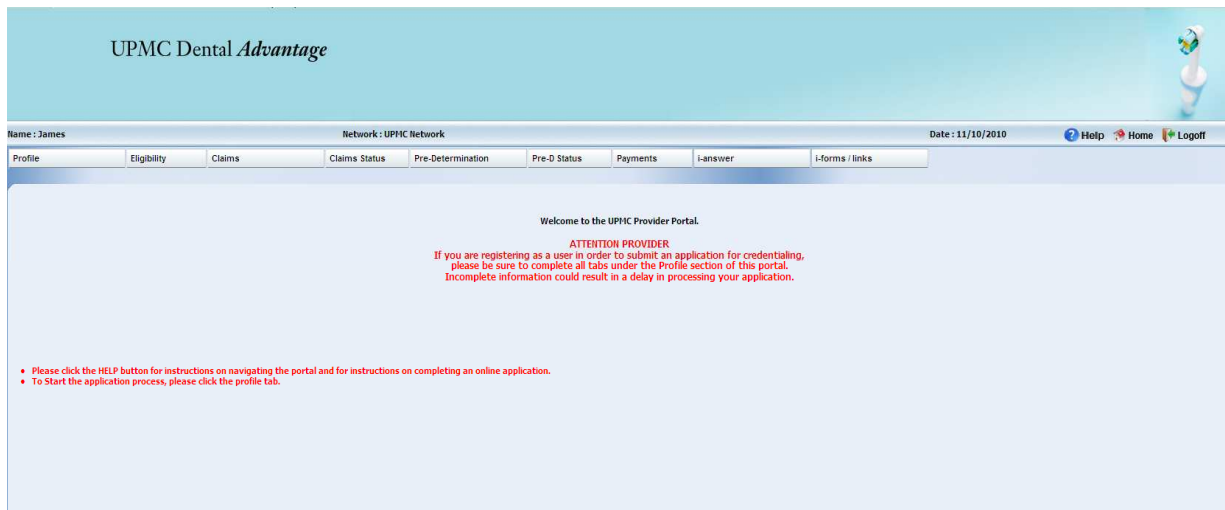
Additionally, you can utilize the following links:

- **Reset** — Click on the Reset button to clear the details entered in the login screen.
- **Home** — Click on the Home button. User is redirected to the UPMC website at www.upmchealthplan.com.
- **Forgot Password** — Click on Forgot Password to retrieve a forgotten password.
- **How to Login** — Click on the How to login button to retrieve a Login User Manual (.PDF) to guide the user across the log-in process.
- **New Registration** — For a new user, click on the Register Now button to get registered with UPMC Health Plan. Upon the completion of the registration process, the user will be assigned a user ID and password, which can be used to log in to the application.

Once the user logs in to Dental OnLine, the homepage appears as shown below.

The homepage displays the following details:

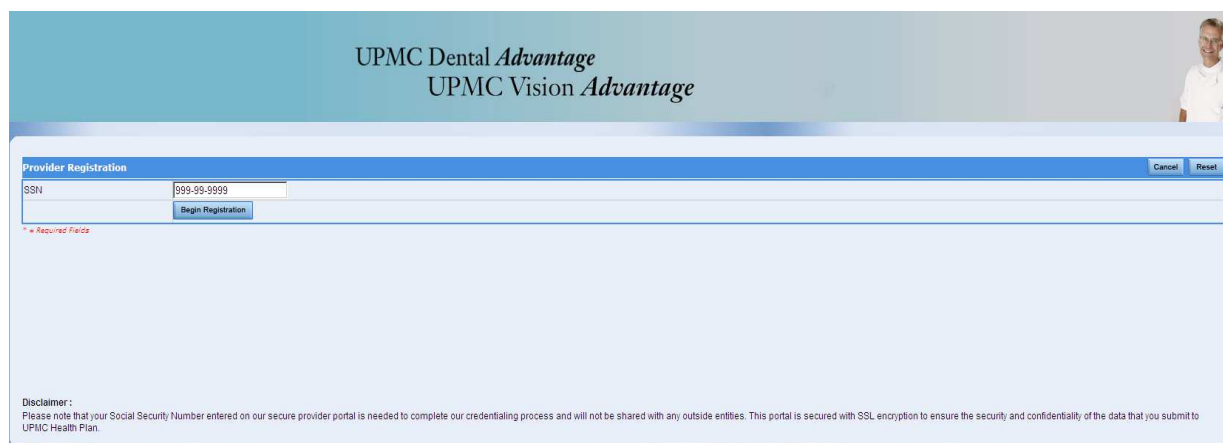
- Login User Name
- Network
- Date
- Help – Click on Help to open the user manual for guidance through the application.
- Home – Click on Home to bring the user back to the homepage.
- Logoff – Click on Logoff to go back to the login screen.



Begin registration if your Social Security number (SSN) is not in the system

The screenshot shows the "Provider Registration" form within the UPMC Dental Advantage system. The header includes "UPMC Dental Advantage" and "UPMC Vision Advantage" along with a small photo of a man. The form itself has a blue header bar with "Provider Registration" and "Cancel" and "Reset" buttons. Below this is a text input field for "SSN". A "Begin Registration" button is positioned below the SSN field. A red asterisk with the text "Required Fields" is located below the SSN field. At the bottom of the form, a "Disclaimer" states: "Please note that your Social Security Number entered on our secure provider portal is needed to complete our credentialing process and will not be shared with any outside entities. This portal is secured with SSL encryption to ensure the security and confidentiality of the data that you submit to UPMC Health Plan."

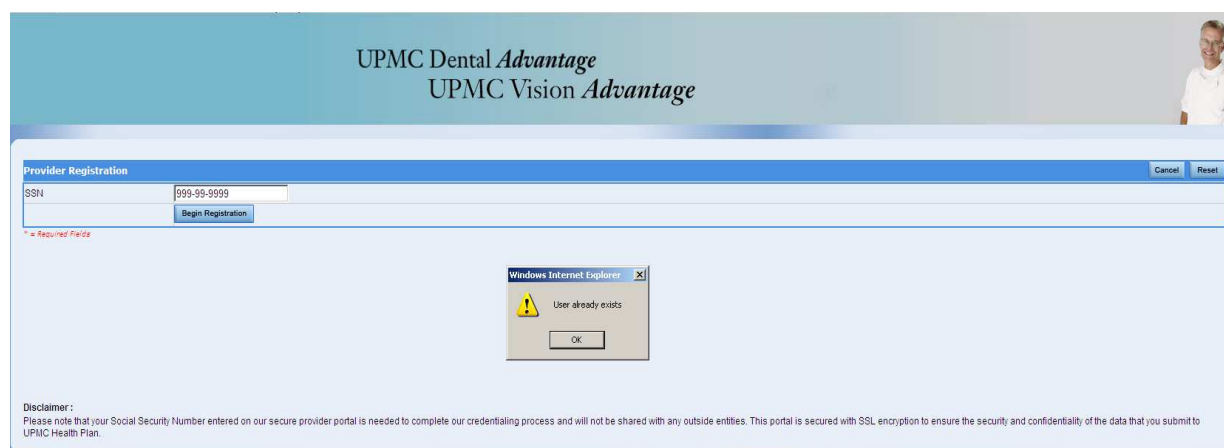
Input your SSN and click on **Begin Registration** as shown below.



The screenshot shows the UPMC Dental Advantage and UPMC Vision Advantage provider registration interface. At the top, the logos are displayed. Below them is a form titled "Provider Registration" with a "Cancel" and "Reset" button. The form contains a label "SSN" and a text input field with the value "999-99-9999". A "Begin Registration" button is located below the input field. A red asterisk and the text "* = Required Fields" are visible. At the bottom, a disclaimer states: "Disclaimer: Please note that your Social Security Number entered on our secure provider portal is needed to complete our credentialing process and will not be shared with any outside entities. This portal is secured with SSL encryption to ensure the security and confidentiality of the data that you submit to UPMC Health Plan."

Clicking on **Begin Registration** initiates the following potential scenarios dictated by the existence of the data in the system.

User already exists



This screenshot shows the same "Provider Registration" form as above, but with an error message displayed. A "Windows Internet Explorer" dialog box is open in the center of the screen, featuring a yellow warning triangle icon and the text "User already exists". Below the text is an "OK" button. The form and disclaimer at the bottom of the page are still visible in the background.

SSN already entered in the system, but no user ID exists. A temporary password is provided.

The screenshot shows the UPMC Dental Advantage registration form. The form is titled "UPMC Dental Advantage" and "UPMC Vision Advantage". It contains a "Registration Form" with fields for First Name, Middle Name, Last Name, SSN, Provider Type, Phone, E-mail, User ID, Hint Question, and Hint Answer. The "Save" button is highlighted with a red box. Below the form, a Microsoft Internet Explorer dialog box displays the following information:

Thanks for registering with UPMC Health Plan. Your user id and password is:
User ID : billnes123
Password : MaMabil5

The dialog box has an "OK" button.

Write down the user ID and password. (The user will be asked to change the password.)

The screenshot shows the UPMC Dental Advantage password change screen. It is titled "UPMC Dental Advantage" and "UPMC Vision Advantage". The screen displays the message "First time login requires the password to be changed". Below this, there are two input fields for "New Password" and "Confirm Password", both marked with an asterisk (*). There are "Submit" and "Cancel" buttons. At the bottom, there is a logo for "S@ntech" and the text "Powered by".

Social Security Number (SSN) doesn't exist. Registration information entered here will provide a temporary password as in the screen above.



The image shows a screenshot of the UPMC Dental Advantage registration form. The header includes the text "UPMC Dental *Advantage*" and "UPMC Vision *Advantage*". A small photo of a man is in the top right corner. The form is titled "Registration Form" and has "Cancel", "Save", and "Reset" buttons. It contains two columns of fields. The left column includes "First Name", "Middle Name", "Last Name", "SSN" (with the placeholder "999-99-9999"), and "Provider Type" (a dropdown menu set to "Dental"). The right column includes "Phone" (with a placeholder "() -"), "E-mail", "User ID", "Hint Question" (a dropdown menu set to "What Is Your Date Of Birth?"), and "Hint Answer". Red asterisks are next to the First Name, Last Name, SSN, and E-mail fields. A red note at the bottom left states "* = Required Fields". The bottom right corner features a logo with a green cross and the text "S@reth".

Registration Form		Cancel	Save	Reset
First Name	<input type="text"/>	Phone	<input type="text"/>	
Middle Name	<input type="text"/>	E-mail	<input type="text"/>	
Last Name	<input type="text"/>	User ID	<input type="text"/>	
SSN	<input type="text" value="999-99-9999"/>	Hint Question	<input type="text" value="What Is Your Date Of Birth?"/>	
Provider Type	<input type="text" value="Dental"/>	Hint Answer	<input type="text"/>	

* = Required Fields

S@reth

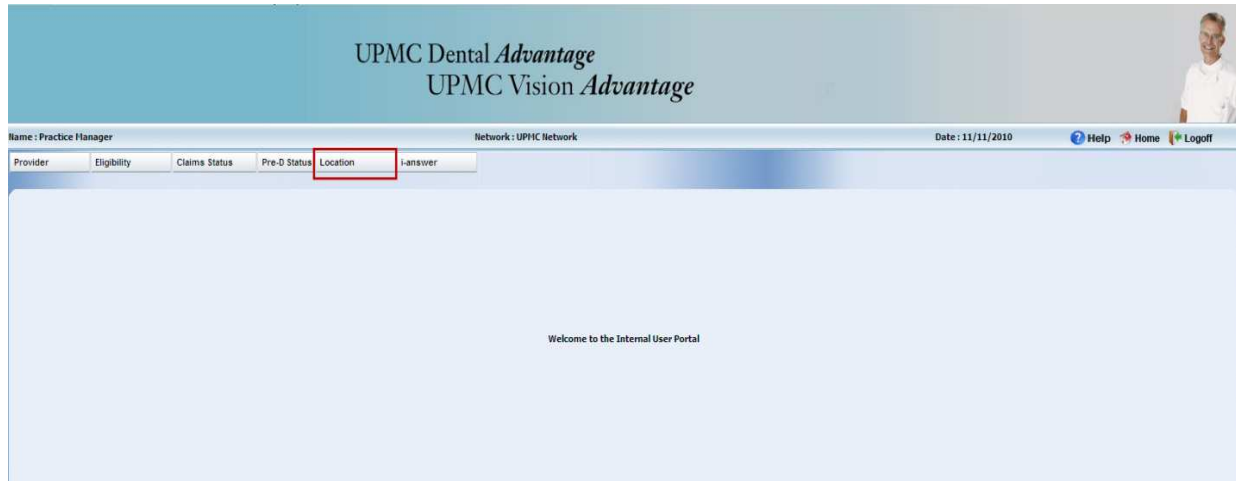
Adding Location Managers

This chapter explains how dentists or their authorized representatives can create users responsible for individual or multiple office locations. The user will learn:

- How to access office locations under their Federal Tax Identification Number.
- How to create usernames and passwords for selected employees.
- How to grant hierarchal privileges to each individual.

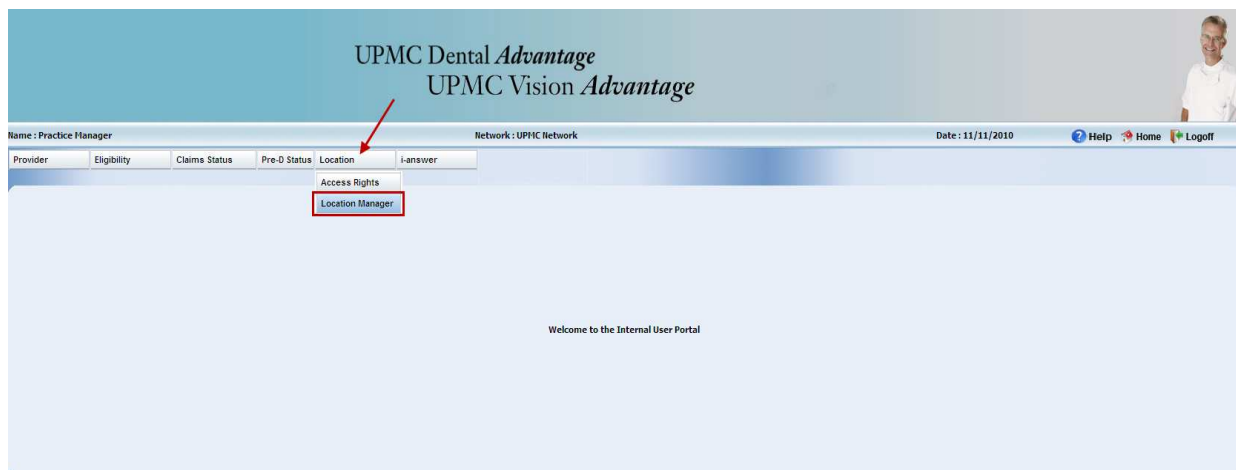
Location

The location tab and functionality gives authorized users the ability to add Location Managers to offices they are responsible for and control access rights. The Location Managers can then “manage” the dentists practicing at those offices.



When the cursor is placed over the location tab, two options for further action will appear:

- **Access Rights** to control four levels of management of responsible dentists.
- **Location Manager** to create usernames and passwords to be given to selected employees to act as authorized users to manage locations for which they are responsible. **Location Manager** will be used first.



Click on **Location Manager**.

By clicking on the **Location Manager** tab, the locations listed under the practice will populate. The user can now select a location by clicking on the magnifying glass icon under the **User** column. In the illustration, only the last location has no entries in the **User ID** or **Password** fields. This designates no Location Manager has been assigned **Rights**.

Click on the magnifying glass.

UPMC Dental Advantage
UPMC Vision Advantage

Name : Practice Manager Network : UPMC Network Date : 11/11/2010 Help Home Logoff

Provider Eligibility Claims Status Pre-D Status Location Answer

Location Manager List Hide Criteria Reset Search

Total Records: 5 Page No: 1/1

Action	Location Name	Address	User ID	Password
	Best Denistry	123 tooth way pittsburgh, Pennsylvania - 15219	pdiaz123	demo123
	Best Orthodontia	5624 McKight Road, Pittsburgh, PA 15229	Philip123	demo123
	One Chatham Center	112 Washington Place Pittsburgh, Pennsylvania - 15219	1Chatham	demo123
	test	test Pittsburgh, Pennsylvania - 15219		

The **Add Location Manager** entry screen will appear in which a **User ID** and **Password** can be entered for the manager. When satisfied with the entries, click on the **Save** button.

UPMC Dental Advantage
UPMC Vision Advantage

Name : Practice Manager Location Manager - Microsoft Internet Explorer provided by UPMC Date : 11/11/2010 Help Home Logoff

Provider Eligibility Claims Status Pre-D Status Location Answer

Location Manager List Hide Criteria Reset Search

Total Records: 5 Page No: 1/1

Action	Location Name	User ID	Password
	Best Dental		
	Best Orthodontia		
	One Chatham Center		
	test		

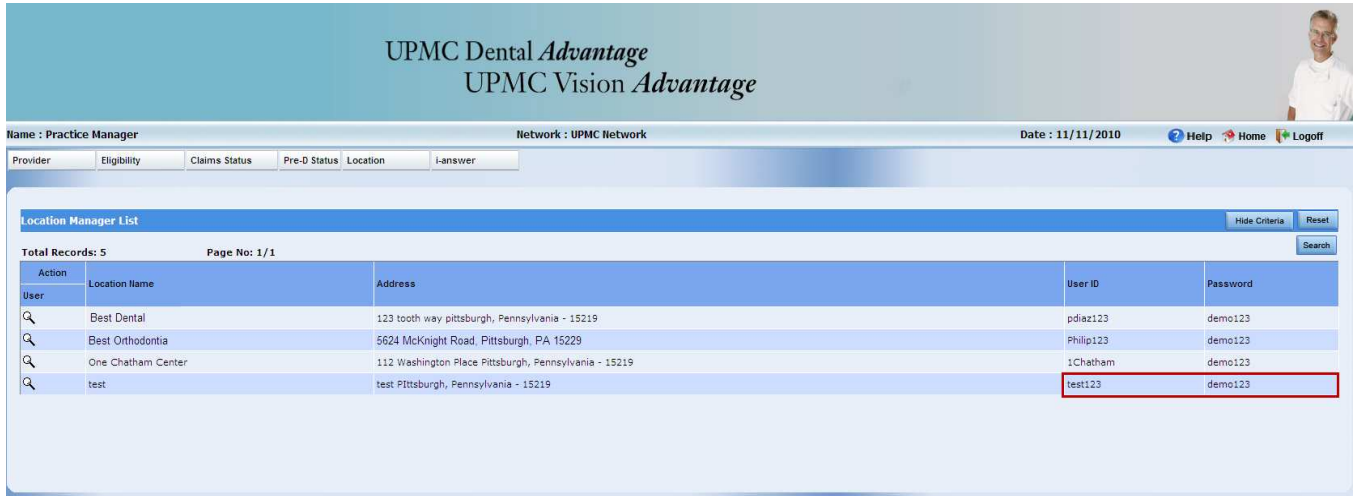
Add Location Manager Save Cancel

User ID demo123

Password test123

* = Required Fields

The **User ID** and **Password** are now visible in the selected row of the **Location**. These unique keywords are to be given to the Location Manager and only that employee for that location.



UPMC Dental *Advantage*
UPMC Vision *Advantage*

Name : Practice Manager Network : UPMC Network Date : 11/11/2010 Help Home Logoff

Provider Eligibility Claims Status Pre-D Status Location Answer

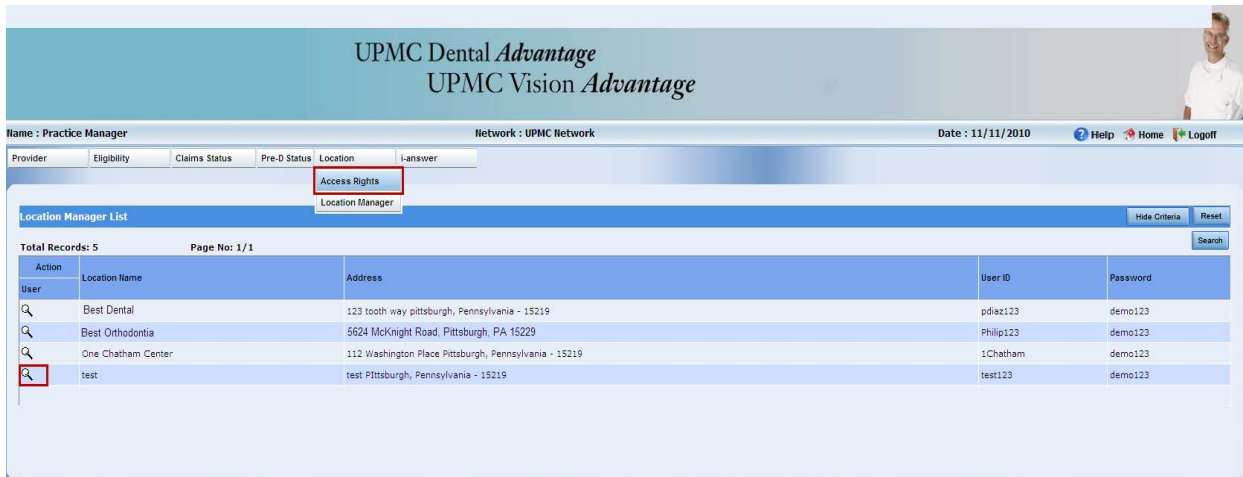
Location Manager List

Total Records: 5 Page No: 1/1

Action	Location Name	Address	User ID	Password
Q	Best Dental	123 tooth way pittsburgh, Pennsylvania - 15219	pdiaz123	demo123
Q	Best Orthodontia	5624 McKnight Road, Pittsburgh, PA 15229	Philip123	demo123
Q	One Chatham Center	112 Washington Place Pittsburgh, Pennsylvania - 15219	1Chatham	demo123
Q	test	test Pittsburgh, Pennsylvania - 15219	test123	demo123

Access Rights can now be granted to the manager. The following actions will initiate that process:

- Pass the cursor over the **Location** tab again.
- Click on **Access Rights**.
- Click on the magnifying glass of the selected location.



UPMC Dental *Advantage*
UPMC Vision *Advantage*

Name : Practice Manager Network : UPMC Network Date : 11/11/2010 Help Home Logoff

Provider Eligibility Claims Status Pre-D Status Location Answer

Access Rights

Location Manager

Location Manager List

Total Records: 5 Page No: 1/1

Action	Location Name	Address	User ID	Password
Q	Best Dental	123 tooth way pittsburgh, Pennsylvania - 15219	pdiaz123	demo123
Q	Best Orthodontia	5624 McKnight Road, Pittsburgh, PA 15229	Philip123	demo123
Q	One Chatham Center	112 Washington Place Pittsburgh, Pennsylvania - 15219	1Chatham	demo123
Q	test	test Pittsburgh, Pennsylvania - 15219	test123	demo123

After clicking the magnifying glass, four check boxes are presented to the user that can be selected to determine the levels of security to be granted the Location Manager. The four levels and description of functionality are:

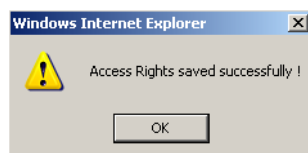
- **Attach Practice** allows the manager to attach locations to the practice associated with the Practice Manager granting privileges.
- **View Provider Locations** allows the manager to view other locations the dentists assigned to the user's office but may practice in the other offices listed.
- **Attach Location to the Provider** is used to connect a dentist to a new location or an office he or she may start to practice in.
- **Remove Provider from the Location** can only be utilized for offices the Location Manager has access to. This action can be used to disassociate a dentist from an office where he or she no longer practices.

The main thing to remember is though all Location Managers may work under the same practice, they can only see the locations and providers they are given access rights to.

The screenshot shows the UPMC Dental Advantage Practice Manager interface. The header includes the UPMC logo and a user profile picture. Below the header, there's a navigation bar with tabs: Provider, Eligibility, Claims Status, Pre-D Status, Location, and I-answer. The main content area is titled "Access Rights" and contains a table with the following columns: Location Name, Address, Attach Practice, View Provider Locations, Attach location to the provider, and Remove Provider from the location. The table lists four locations: Best Dental, Best Orthodontia, One Chatham Center, and test. The "test" row is highlighted with a red border, and its "Attach Practice" and "View Provider Locations" checkboxes are also highlighted with a red border. To the right of the table are buttons for "Go Back", "Save", and "Reset".

Location Name	Address	Attach Practice	View Provider Locations	Attach location to the provider	Remove Provider from the location
Best Dental	123 tooth way pittsburgh, Pennsylvania - 15219	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Best Orthodontia	5624 McKnight Road, Pittsburgh, PA 15229	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
One Chatham Center	112 Washington Place Pittsburgh, Pennsylvania - 15219	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
test	test Pittsburgh, Pennsylvania - 15219	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

When the user has completed granting rights, clicking the **Save** button causes a message to display that shows **Access Rights** saved successfully. The user will click **OK** to close the message.



Profile

This tab enables dentists to enter demographic and other relevant personal information to apply for credentialing or establish a complete account in Dental OnLine, providing full functionality to the user.

- **Main Information** pertaining to demographic and practice specifics.
- **Supporting Documentation** of dentist's credentials.
- **Declarations** of dentist's history.
- **Review** completion of the electronic credentialing form.

The **Dentist's Profile** and all the associated information can be accessed by the user by simply clicking the **Profile** tab. All information is proprietary and protected. Only the user with a unique login can access these electronic files.

UPMC Dental Advantage

Name: James Network: UPMC Network Date: 11/11/2010 Help Home Logoff

Profile Eligibility Claims Claims Status Pre-Determination Pre-D Status Payments I-Answer

Welcome to the UPMC Provider Portal.

ATTENTION PROVIDER
If you are registering as a user in order to submit an application for credentialing, please be sure to complete all tabs under the Profile section of this portal. Incomplete information could result in a delay in processing your application.

- Please click the HELP button for instructions on navigating the portal and for instructions on completing an online application.
- To Start the application process, please click the profile tab.

UPMC Dental Advantage has pre-populated the **Profile** tab with data received on the initial application. If there are any changes in the contained information that needs to be updated, please do not make changes directly to the **Profile** tabs. Changes need to be communicated through the UPMC Dental Advantage Provider Advocates or Network Managers. UPMC Dental Advantage will notify all dentists when they can make changes directly to Dental OnLine.

Profile Page

UPMC Dental Advantage

Name: James Network: UPMC Network Date: 11/11/2010 Help Home Logoff

Profile Eligibility Claims Claims Status Pre-Determination Pre-D Status Payments I-Answer

Provider Name: Bonded, James SSN: 777889999 Primary Specialty: General Dentistry

Main Information Supporting Information Declarations Review and Submit

Demographics Practice Specialty Licensure Professional Liability

Demographics Save Cancel Reset

Demographics

First Name	James	Middle Name		Last Name	Bonded
Preferred Name		Maiden Name		Degree	DMD
Date of Birth	1/1/1970	Gender	Male	Email	JBONDED@HOTMAIL.C
SSN	777-88-9999	Individual NPI	1234567890	UPMC ID	123456
Phone	(412) 412-4124	Fax		Pager	
Provider Type	Dental	Legal Status	CORPORATE	Prefix	Dr.

Office Contact Person

Title	Office Manager	Name	Mia	Phone	(412) 412-4124	Email	
-------	----------------	------	-----	-------	----------------	-------	--

Conflict of Interest

Are you an owner of or an investor in a health care facility or health care entity? No

Name of Organization Your relationship to the organization

How do you inform patients of your interest?

* = Required Fields

Verifying and Viewing A Patient's Eligibility

In this chapter, the user will learn how to:

- View subscriber and dependent demographic information, including the dependent relationship to the subscriber, and group information.
- View effective dates of coverage.
- View plan benefit information.
- View a specific patient's Spending Summary, which displays benefit limits and amounts applied/paid towards the patient's limits.

Eligibility

Determining a patient's eligibility and plan benefits is an important step in the treatment process. Dental OnLine provides the dentist's office with the ability to check eligibility online as needed. The information that is available is driven from the subscriber's (employee's) Social Security number. From the **Home** page, click on the **Eligibility** tab to begin the search/view process. Clicking on the **Home** icon will return the user to the Dental OnLine **Home Screen**.

Narrowing the search will speed up the research process on the part of the office or billing staff. To begin the search process to view a patient's eligibility and plan information, use the following search tools:

- To view the entire family (subscriber and eligible dependents), enter the subscriber's SSN.

UPMC Dental *Advantage*

Name : John Network : UPMC Network Date : 11/10/2010 ? Help Home Logoff

Profile Eligibility Claims Claims Status Pre-Determination Pre-D Status Payments i-answer i-forms / links

Subscriber/Member List Hide Criteria Reset

Subscriber SSN: 444-25-0000 Patient First Name: Patient Last Name: Date Of Birth: Search

Total Records: 3 Page No: 1/1

View	View Plans	Name	Subscriber/Member ID #	Date of Birth	Relationship	Subscriber
Q	Q	WONDER, JERMAINE	000000024-01	08/01/1975	SUBSCRIBER	WONDER, JERMAINE
Q	Q	WONDER, STACEY	000000024-02	07/01/1974	SPOUSE	WONDER, JERMAINE
Q	Q	WONDER, DUSTIN	000000024-03	05/01/1999	DEPENDENT	WONDER, JERMAINE

• Please input SSN or first and last name.

Or

- To view a specific member's eligibility record, enter that patient's first and last name in the appropriate fields.
- Entering a date of birth will further refine the results of the search.

When entry of the relevant data is complete, click on the **Search** button to see the results.

Once the subscriber and/or dependent data results are displayed, the following actions can be performed by the user to view plan or demographic information.

UPMC Dental *Advantage*

Name : John Network : UPMC Network Date : 11/10/2010 ? Help Home Logoff

Profile Eligibility Claims Claims Status Pre-Determination Pre-D Status Payments i-answer i-forms

Subscriber/Member List Hide Criteria Reset

Subscriber SSN Patient First Name Patient Last Name Date Of Birth

Stacey Wonder

Total Records: 1 Page No: 1/1 Search

View	View Plans	Name	Subscriber/Member ID #	Date of Birth	Relationship	Subscriber
		WONDER, STACEY	000000024-02	07/01/1974	SPOUSE	WONDER, JERMAINE

• Please input SSN or first and last name.

- View a patient's demographics by clicking on the magnifying glass in the **View** column.
- View the plan information by clicking on the magnifying glass in the **View Plans** column.
- Hide the search boxes by clicking on the **Hide Criteria** button (the **Show Criteria** button will replace the **Hide** button).
- Click on the **Reset** button to enable entry of new search criteria.

UPMC Dental *Advantage*

Name : John Network : UPMC Network Date : 11/10/2010 ? Help Home Logoff

Profile Eligibility Claims Claims Status Pre-Determination Pre-D Status Payments i-answer i-forms / links

Subscriber/Member List Hide Criteria Reset

Subscriber SSN Patient First Name Patient Last Name Date Of Birth

Stacey Wonder

Total Records: 1 Page No: 1/1 Search

View	View Plans	Name	Subscriber/Member ID #	Date of Birth	Relationship	Subscriber
		WONDER, STACEY	000000024-02	07/01/1974	SPOUSE	WONDER, JERMAINE

The user can now verify the patient's information. The following actions can now be performed:

- Click on the magnifying glass in the **View** column to see the patient's demographic information and effective and termination dates.

Or

- Click on the magnifying glass in the **View Plans** column to see the patient's benefit plan details, including coinsurance and deductible information, if applicable.

UPMC Dental *Advantage*

Name : John Network : UPMC Network Date : 11/10/2010 Help Home Logoff

Profile Eligibility Claims Claims Status Pre-Determination Pre-D Status Payments i-answer

Subscriber/Member List Hide Criteria Reset

Subscriber SSN Patient First Name Patient Last Name Date Of Birth

WONDER, STACEY

Total Records: 1 Page No: 1/1 Search

View	View Plans	Name	Subscriber/Member ID #	Date of Birth	Relationship	Subscriber
		WONDER, STACEY	000000024-02	07/01/1974	SPOUSE	WONDER, JERMAINE

The patient's demographic screen is shown below and the additional actions available from this screen are:

- Click on the **Plan** icon to view the plan benefits information.
- Click on **Spending Summary** to view the benefit limit amounts and the amounts already used toward those limits.
- To return to the eligibility search screen, click on the **Go Back** button.

UPMC Dental *Advantage*

Name : John Network : UPMC Network Date : 11/03/2010 Help Home Logoff

Profile Eligibility Claims Pre-Determination Claims Status Pre-D Status Payments i-answer

View Details Spending Summary Go Back

Name	WONDER, STACEY	Member #	000000024-02
Date of Birth	07/01/1974	Gender	F
Relation	SPOUSE	Address1	78649 CYPRESS ST
Address2		Address3	
City	PITTSBURGH	State	Pennsylvania
Zip	15221	Phone	
Subscriber Name	WONDER, JERMAINE	Subscriber #	000000024-01
Effective Date	1/1/2009	End Date	12/31/2099
Group ID # / Name	015983 / ERIC SMITH SALON	Rider	

The screen shot below shows the **Plan View** pop-up box and lists the Benefit Type, Plan, Effective Date and End Date of the plan.

- Clicking on the Adobe icon under **Plan** will provide the user with a plan benefits grid for the patient.
- Clicking on the **Cancel** button will close the pop-up box.

UPMC Dental Advantage

Name : John Network : UPMC Network Date : 11/10/2010 ? Help Home Logoff

Profile Eligibility Claims Claims Status Pre-Determination Pre-D Status Payments i-answer

Subscriber/Member List

Subscriber SSN Patient First Name

Stacey

Total Records: 1 Page No: 1/1

View	View Plans	Name	Subscriber/Member ID #
Q	Q	WONDER, STACEY	000000024-02

Plan View

Benefit Type	Plan	Effective Date	End Date
Dental	DENTAL - BASIC PLAN (01)		

Cancel

Date Of Birth

Search

Subscriber

WONDER, JERMAINE

Click on () icon to view your detailed plan description.

From the **View Details** screen, click on the **Spending Summary** button to view the benefit limits and amounts paid toward those limits.

UPMC Dental Advantage

Name : John Network : UPMC Network Date : 11/10/2010 ? Help Home Logoff

Profile Eligibility Claims Claims Status Pre-Determination Pre-D Status Payments i-answer

View Details

Name	WONDER, STACEY	Member #	000000024-02
Date of Birth	07/01/1974	Gender	F
Relation	SPOUSE	Address1	78649 CYPRESS ST
Address2		Address3	
City	PITTSBURGH	State	Pennsylvania
Zip	15221	Phone	
Subscriber Name	WONDER, JERMAINE	Subscriber #	000000024-01
Effective Date	1/1/2009	End Date	12/31/2099
Group ID # / Name	015983 / ERIC SMITH SALON	Plan	

Spending Summary Go Back

Once the **Spending Summary List** screen appears, click on the magnifying glass to view the summaries.

UPMC Dental *Advantage*

Name : John Network : UPMC Network Date : 11/10/2010 ? Help Home Logoff

Profile Eligibility Claims Claims Status Pre-Determination Pre-D Status Payments i-answer

Plans Go Back

Dental	Effective Date	Termination Date
DENTAL - BASIC PLAN		

Below is an example of a patient's Spending Summary for the current benefit year. The page that follows the view gives a description of the fields on the summary. The only additional user action available is the **Go Back** button to return to the member demographics page.

UPMC Dental *Advantage*

Name : John Network : UPMC Network Date : 11/10/2010 ? Help Home Logoff

Profile Eligibility Claims Claims Status Pre-Determination Pre-D Status Payments i-answer i-forms / links

Spending Summary List Go Back

Plan Name	DENTAL - BASIC PLAN						
Member Name	WONDER, STACEY						
Member #	000000024-02						

Individual Deductible	Satisfied Individual Deductible	Family Deductible	Satisfied Family Deductible	Individual OON Deductible	Satisfied Individual OON Deductible	Family OON Deductible	Satisfied Family OON Deductible
0.00	0.00	0.00	0.00	100.00	0.00	300.00	0.00

In Network Annual Plan Maximum	In Network Benefits Paid	Out of Network Annual Plan Maximum	Out of Network Benefits Paid	In Network Orthodontia Lifetime Maximum	In Network Orthodontia Lifetime Benefits Paid
0.00	0.00	0.00	0.00	0.00	0.00

• OON = Out Of Network

Spending Summary Field Descriptions

- 1) **Individual Deductible** – the annual individual out-of-pocket expense the patient has to satisfy before his or her plan will reimburse the assigned benefit (patient responsible).
- 2) **Satisfied Individual Deductible** – the amount that has been applied to date toward the annual individual deductible.
- 3) **Family Deductible** – the annual family out-of-pocket expense that would need to be satisfied before the plan will reimburse the assigned benefit (patient responsible).
- 4) **Satisfied Family Deductible** – the amount that has been applied to date toward the family annual cumulative deductible.
- 5) **Individual Out-of-Network Deductible** – the annual individual out-of-pocket expense for services rendered by a non-contracted dentist that the patient has to satisfy before the plan will reimburse the assigned benefit (patient responsible).
- 6) **Satisfied Out-of-Network Deductible** – the amount that has been applied to date for services rendered by a non-contracted dentist that the patient has to satisfy before the plan will reimburse the assigned benefit (patient responsible).
- 7) **Family Out-of-Network Deductible** – the annual family out-of-pocket expense for services rendered by a non-contracted dentist that would need to be satisfied before their plan will reimburse the assigned benefit (patient responsible).
- 8) **Satisfied Family Out-of-Network Deductible** – the annual amount that has been applied to date for services rendered by a non-contracted dentist towards the family annual cumulative deductible.
- 9) **In Network Annual Plan Maximum** – the annual amount the plan allows cumulatively for covered services provided by a contracted dentist. After the maximum has been reached, all services up to the contracted amount for the remainder of the plan year are the patient's responsibility.
- 10) **In-Network Benefits Paid** – the total of annual benefits paid to date by the member's plan for services rendered by contracted dentists.
- 11) **Out-of-Network Annual Plan Maximum** – the annual amount the plan allows cumulatively for covered services provided by a non-contracted dentist. After the maximum has been reached, all services provided by non-contracted providers for the remainder of the plan year are the patient's responsibility.
- 12) **Out of Network Benefits Paid** – the total of annual benefits paid to date by the member's plan for services rendered by non-contracted dentists.
- 13) **Orthodontia Lifetime Maximum** – the plan lifetime maximum for all covered orthodontia services per child under age 19.
- 14) **Orthodontia Lifetime Benefits Paid** – the total to date paid for all covered orthodontia services.

Submitting a Claim

This module will demonstrate the thorough steps required to submit a UPMC Dental *Advantage* claim. The patient will first be determined to have active coverage with their plan in order to initiate this process. The tutorial will illustrate:

- Selecting the correct subscriber or member.
- The population of all required data fields.
- Showing what fields will be auto-populated by entering data in the first required fields.
- Mechanisms available to select proper coding of services rendered.
- The ability to correct data before finalizing a claim submission.
- Verifying the completion of a submitted claim.

Note:

To submit a claim using Dental OnLine, a location must be set up on the **Profile** tab. Please review these steps **prior** to submitting your first claim:

Click on the **Profile** tab, and then select the **Practice** tab.

If a practice name exists with a location, then you may begin submitting claims through Dental OnLine.

UPMC Dental Advantage

Name: Georgean Network: UPMC Network Date: 11/12/2010 Help Home Logoff

Profile Eligibility Claims Claims Status Pre-Determination Pre-D Status Payments i-answer i-forms / links

Provider Name: Orr, Georgean SSN: 000001111 Primary Specialty:

Main Information Supporting Information Declarations Review and Submit

Demographics Practice Specialty Licensure Professional Liability

Provider Practice Cancel Reset

Tax ID

Total Records: 1 Page No: 1 / 1 Search

Records Per Page 20 Go to page 1

Location	Billing Address	Delete	Practice Name	Tax ID
			Tonys Dental	235555555

When checking the **Profile** screen, if no practice or location exists (example below), follow these steps to add your practice and location:

- Enter your tax identification number in the **Tax ID** field and then click the **Search** button.
- Close the **No Practice Found Adding New** by clicking **OK**.
- Complete the **Add Practice** as on the following page and continue the steps.

The screenshot shows the UPMC Dental Advantage web application interface. At the top, the header displays "UPMC Dental Advantage" and a date of "11/12/2010". Below the header, a navigation bar includes tabs for "Profile", "Eligibility", "Claims", "Claims Status", "Pre-Determination", "Pre-D Status", "Payments", "i-answer", and "i-forms / links". The main content area is titled "Provider Practice" and contains a form with the following fields: "Provider Name: Dental, Ted", "SSN: 000222222", and "Primary Specialty:". Below these fields, there are tabs for "Main Information", "Supporting Information", "Declarations", and "Review and Submit". The "Main Information" tab is active, showing a "Tax ID" field. A "Search" button is located at the bottom right of the form.

If your tax identification number is already pre-loaded, you will be able to select from a list of pre-populated addresses to assign to the tax identification number. If the applicable address is not within the list, follow the directions below to add a new address to the tax identification number.

- If your tax identification number is not loaded, complete the practice screen by filling out the practice name for the tax identification number and then click on the **Save** button.

This screenshot shows the same "Provider Practice" screen as the previous one, but with an "Add Practice" dialog box open. The dialog box has a title bar that reads "Practice - Microsoft Internet Explorer provided by UPMC". It contains two input fields: "Tax ID" with the value "22-2221222" and "Practice Name" with the value "Ted's Dental Practice". There are "Save" and "Cancel" buttons at the top right of the dialog. A red asterisk and the text "Required Fields" are visible below the input fields. The background form shows the "Tax ID" field now populated with "22-2221222".

Once **Save** is selected, you will be able to add the physical office address(es) for the tax identification number by clicking on the magnifying glass under the **Location** heading.

UPMC Dental Advantage

Name : Ted Network : UPMC Network Date : 11/12/2010 ? Help Home Logoff

Profile Eligibility Claims Claims Status Pre-Determination Pre-D Status Payments i-answer i-forms / links

Provider Name: Dental, Ted SSN: 000222222 Primary Specialty:

Main Information Supporting Information Declarations Review and Submit

Demographics Practice Specialty Licensure Professional Liability

Provider Practice Cancel Reset

Tax ID

Total Records: 1 Page No: 1/1

Records Per Page 20 Go to page 1

Location	Billing Address	Delete	Practice Name	Tax ID
			Ted's Dental Practice	222221222

Select **Add** from the following screen. If addresses are populated, you may select a location to tie to your tax identification number. If not, hit the **Add** button again and you will see the following screen:

UPMC Dental Advantage

Name : Ted Provider Location - Microsoft Internet Explorer provided by UPMC Home Logoff

Profile Provider Location

Total Records: 1

Records Per Page 20 Click on Add to

Go Back Save Reset

Practice Name	Ted's Dental Practice	Tax ID	22-2221222
Location Name		Address1	
Address2		City	
State	Select	Zip	
Phone1	() -	Phone 2	() -
Fax	() -		

* = Required Fields

Done

Trusted sites 100%

Complete the location tab by adding the data for your office location:

- **Location Name** – name of your physical office
- **Address 1, Address 2, City, State, and Zip code**
- **Phone Number**
- **Phone Number 2** and **Fax** are optional fields.

Once added, click the **Save** button and your office location will automatically be saved under the tax ID number.

From this screen, please identify your primary office location by clicking the **Primary** box next to the location, then click **Save**.

Delete	Location Name	Address1	Address2	City	State	Zip	Phone 1	Phone 2	Fax	Primary	Work Hours	Languages
	Teds Dental	123 Blue Street		Pittsburgh	Pennsylvania	15206	(412) 555-1212			<input type="checkbox"/>		

• Click on Add to select your applicable locations from the list of locations already defined for your practice.

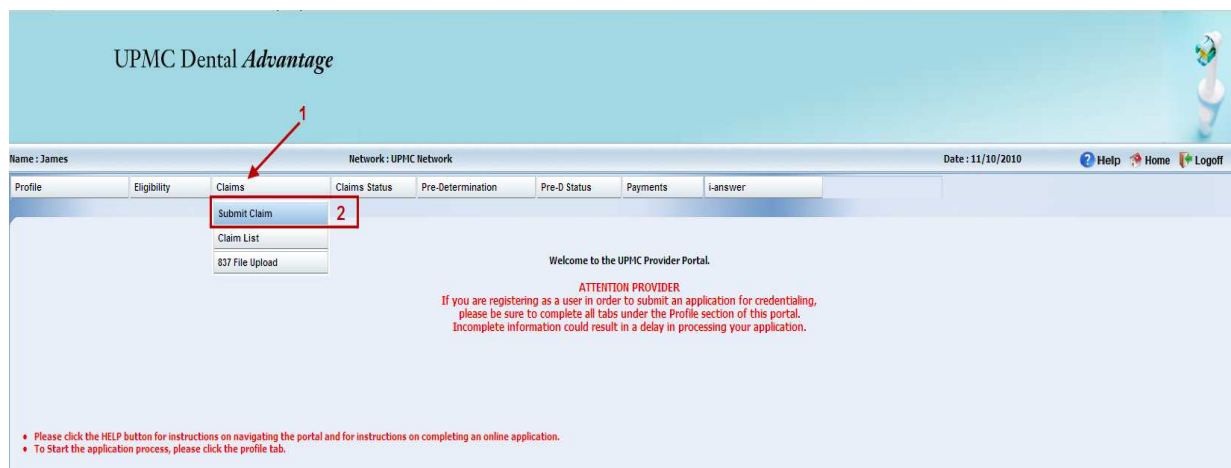
You may add as many physical locations to this tax ID number as needed by clicking the **Add** button and repeating the steps above.

Congratulations! Once your tax ID number is on file with a corresponding practice and location, you may submit claims directly through Dental OnLine.

If you have more than one tax ID number, repeat the process for each tax ID number you use in your practice.

To begin a claim submission

- Place the cursor over the **Claims** button to make the drop-down selections visible.
- Click on **Submit Claim** to activate the claim entry screen.

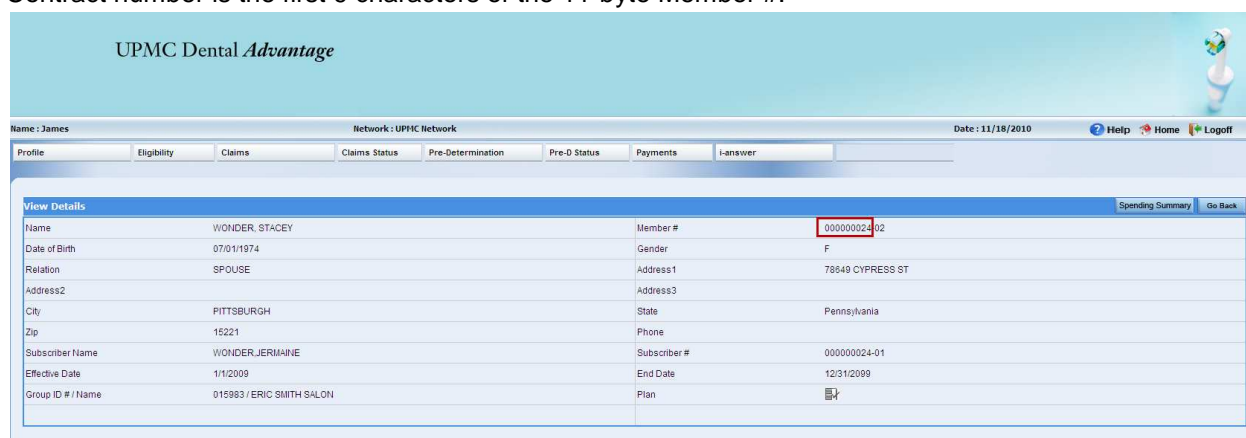


There are two paths a user can choose to select a patient from the drop-down menu.

- **Subscriber Social Security Number (SSN)** or
- **Member Contract Number****

Navigation across the claim entry screen is best done by utilizing the **Tab** key on the keyboard and traveling left to right. We do not recommend utilizing the computer's mouse, as this may bypass a required field that will initiate a prompt to return to that field and populate the necessary information. Once the patient is correctly identified, either method will initiate auto-population of the remaining necessary demographic fields.

The Member Contract number can be found on the eligibility tab under the **View icon. The Member Contract number is the first 9 characters of the 11-byte Member #.



The **Search By** field is automatically defaulted to the **Subscriber SSN(1)** option. When this is the selected method of submission, the user will manually enter the SSN(2) in the field. When the user tabs to the next field after entry in field 2, the system will auto-populate:

- **Member Name**
- **Patient First Name**
- **Patient Last Name**
- **Patient DOB (Date of Birth)**
- **Member #**
- **Gender**
- **Relationship Code**

In this example, the **Member Contract #** was selected in the **Search By** drop-down field (1) and the 9-digit member contract number was input in field (2). By hitting tab after entry, the same demographic information was auto-populated.

The next illustration shows how to select the actual patient from the member name drop-down list. It is important to select the member name on each claim submission. To do this, click on the drop-down arrow of

the member name field and the additional eligible member names attached to the subscriber's policy will be visible (1). For this demonstration, Stacey, the spouse, will be selected (2), and her information will be populated.

UPMC Dental Advantage

Name: James Network: UPMC Network Date: 11/18/2010 Help Home Logout

Profile Eligibility Claims Claims Status Pre-Determination Pre-D Status Payments i-answer

Submit Online Claim - Header Cancel Save Reset

Claim Type D

Search By Member Contract # 000000024

Member Name WONDER, STACEY 1

Patient First Name STACEY

Patient Middle Name WONDER, STACEY 2

Patient Last Name WONDER

Patient DOB 07/01/1974

Member # 000000024-02

Gender F

Relationship Code SPOUSE

Patient Account #

Orthodontia ☐

The Claim Entry Screen

On this screen the spouse's name has been populated with her information. There are additional fields at the header to complete that aid in a successful claim submission. An example is listed below.

UPMC Dental Advantage

Name: John Network: UPMC Network Date: 11/08/2010 Help Home Logout

Profile Eligibility Claims Claims Status Pre-Determination Pre-D Status Payments i-answer i-forms / links

Submit Online Claim - Header Cancel Save Reset 17

Claim Type D

Search By Subscriber # 000000024

Member Name WONDER, STACEY

Patient First Name STACEY

Patient Middle Name

Patient Last Name WONDER

Patient DOB 07/01/1974

Member # 000000024-02

Gender F

Relationship Code SPOUSE

Patient Account # 1

Orthodontia 2 ☐

Replacement of prosthesis 3 ☐

Location ID # / Name 4

Tax ID 5

Address1 5

Address2 5

Address3 5

City 5

State 5

Zip 5

Group NPI # 5

Billing provider name/organization name 5

Billing provider first name 6 John

Servicing provider first name 6 John

Servicing Provider NPI # 6 1234567890

Servicing provider last name 6 Davidson

Diagnosis Code 6 9999.9

PWIK 7

Submit Online Claim - Detail

Date of Service 8

Procedure Code 9

Tooth #/Modifier 10

Tooth Surface 11

Quad/Arch 12

Quantity/units 13

Diagnosis pointer 14

Charge Amount 15

Add 16

- 1) **Patient Account Number** – not required but helpful in correspondence and office record keeping.
- 2) **Orthodontia** – this requires a checkmark if services are orthodontia-related. Once selected, additional fields will display that are required to be completed.
 - a. Appliance Banding Date
 - b. Total Months of Treatment
 - c. Remaining Months of Treatment
- 3) **Replacement of prosthesis** – this requires a checkmark if it is relative to the listed service. Once selected, an additional field will display that is required to be completed.
 - a. Prior Placement date
- 4) **Location ID #/Name** - The notepad to the right of the field is incorporated for the user to select the place of service from a multiple location practice. By selecting the location, it will auto-populate the dentist's location demographics. Each claim submission must have a Location ID #/Name selected.

The following actions will complete the location selection process:

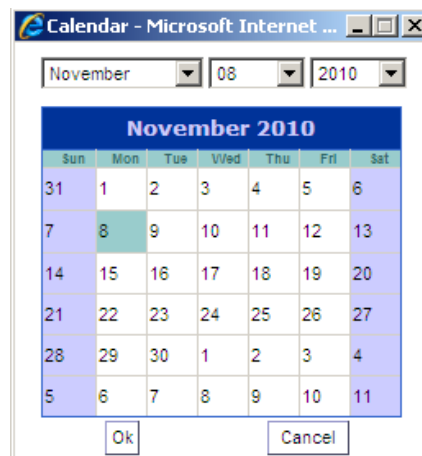
- **Filter By** would be used by large corporate practices with many locations. (1)
- **Description** is the same as **Location Name** if searching many locations. (2)
- **Search** is used when filtering is used or **Description** added. (3)
(In this case it wasn't necessary because only two locations exist.)
- **Location Code** is clicked for the desired location. (4)

Location Code	Location Name	Location Address	Practice TaxID
823	JD Dental	616 Toni Ave Suite 600 Beaver Falls, PA 15010	777889999
824	Pearly Grill Main Office	121 Main St New Brighton, PA 15066	777889999

- 5) All data fields designated with the number (5) on the illustration will populate upon selecting the **Location #/Name** if that information is appropriate and on file for the dentist.
- 6) All data fields designated by the number (6) are auto-populated based on the user log on.
- 7) **PWK** – this stands for paperwork and is required to be populated with the letters (EB) when the patient has other dental insurance that is the primary payer.

- 8) **Date of Service** – the date can be manually entered using the DD/MM/YYYY format, or utilize the calendar icon to the right of the field to select the date services were provided. Two date selection methods can be used:

- Using the available dropdown box for Month, Date and Year and clicking **OK**.
- If the visible month is the month desired, click on the block of the day required.
- Either action will populate the date on the form and automatically close the box.



- 9) **Procedure Code** – the procedure code can be manually entered if known, and tabbing to the next field will populate the description or utilizing the notepad icon to the right of this field will bring up a complete list of codes for viewing and selection to be populated.

- Filter by **CDT CODE** and put a partial code in **Description**. Click the **Search** button.
- Filter by **CDT Description** and put in a partial description (ex. filling).
- Click on **Code** of desired procedure to populate form. That will automatically close the pop-up box.



10) **Tooth number** can be manually entered if known or utilize the notepad icon to the right of the field to initiate a look-up box.

- Filter by **Tooth Code** or **Description**.
- Enter the corresponding information in the **Description** field.
- Click the **Search** button.
- Click on the desired tooth number as shown and the look-up box will close automatically and populate the claim form.

11) **Tooth surface** can be manually entered if known or utilize the notepad icon to the right of the field to initiate a look-up box.

- Click the box to the left of the desired tooth surface.
- Click **Save** and the look-up box will automatically close and populate the claim form.

12) **Quad/Arch** – the quadrant or arch can be manually entered if known or utilize the notepad icon to the right of the field to initiate a look-up box.

- Click in the box to the left of the desired **Quad Name**.
- Click on the **Save** button.
- The box will automatically close and populate the claim form.

Select All	Quad Code	Quad Name
<input type="checkbox"/>	00	ENTIRE ORAL CAVITY
<input type="checkbox"/>	01	MAXILLARY ARCH
<input type="checkbox"/>	02	MANDIBULAR ARCH
<input type="checkbox"/>	03	UPPER RIGHT SEXTANT
<input type="checkbox"/>	04	UPPER ANTERIOR
<input type="checkbox"/>	05	UPPER LEFT SEXTANT
<input type="checkbox"/>	06	LOWER LEFT SEXTANT
<input type="checkbox"/>	07	LOWER ANTERIOR
<input type="checkbox"/>	08	LOWER RIGHT SEXTANT
<input type="checkbox"/>	10	UPPER RIGHT QUADRANT
<input type="checkbox"/>	20	UPPER LEFT QUADRANT
<input type="checkbox"/>	30	LOWER LEFT QUADRANT
<input type="checkbox"/>	40	LOWER RIGHT QUADRANT
<input type="checkbox"/>	LA	LOWER ANTERIOR
<input type="checkbox"/>	LL	LOWER LEFT
<input checked="" type="checkbox"/>	LR	LOWER RIGHT
<input type="checkbox"/>	UA	UPPER ANTERIOR
<input type="checkbox"/>	UL	UPPER LEFT
<input type="checkbox"/>	UR	UPPER RIGHT

13) **Quantity/units** field is auto-populated with 1 unit. The user can change the number and add additional units if it is appropriate for the procedure billed.

14) **Diagnosis Pointer** field is auto-populated with one unit and is appropriate to be billed for a single service.

15) **Charge Amount** – enter the charge amount for the service.

16) Click the **Add** button to add the service line to the claim. This process will be repeated for any and all additional services billed.

17) Lastly, the user can:

- **Save** the claim if satisfied with all the data elements.
- **Reset** the form to begin again.
- **Cancel** to terminate the claim submission.

The completed claim form is illustrated next with the added service line at the very bottom. Additional service lines would be shown below this line with totals for claims and charge amount.

UPMC Dental Advantage

Name: James Network: UPMC Network Date: 11/18/2010 Help Home Logout

Profile Eligibility Claims Claims Status Pre-Determination Pre-D Status Payments i-answer

Member Name [dropdown] Patient First Name STACEY
 Patient Middle Name [text] Patient Last Name WONDER
 Patient DOB 07/01/1974 Member # 000000024-02
 Gender F Relationship Code SPOUSE
 Patient Account # 1
 Orthodontia 2 ☐
 Replacement of prosthesis 3 ☐
 Location ID # / Name 4 823 JO Dental Tax ID 5 777889999
 Address1 5 516 Toni Ave Address2 5 Suite 600
 Address3 5 City 5 Beaver Falls
 State 5 Pennsylvania Zip 5 15010
 Group NPI # 5 Billing provider name/organization name 5 pearly grill
 Billing provider first name 6 James Servicing provider first name 6 James
 Servicing Provider NPI # 6 1234567890 Servicing provider last name 6 Bonded
 Diagnosis Code 6 9999.9 PVR 7

Submit Online Claim - Detail

Date Of Service 8 Procedure Code 9 Tooth #/Modifier 10 Tooth Surface 11 Quad/Arch 12 Quantity/units 13 Diagnosis pointer 14 Charge Amount 15 Add 16

Change	Delete	Date Of Service	Procedure Code	Tooth #/Modifier	Tooth Surface	Quad/Arch	Quantity/units	Diagnosis pointer	Charge Amount
		11/01/2010	D2940	11	I	03	1	1	65.00
		11/01/2010	D2940	R	O	05	1	1	65.00

17
Total Quantity : 2 and Total Claim : 130.00

Submit Online Claim - Header Cancel Save Reset

Claim List

In this chapter, the user will learn how to:

- View all claims submitted online through direct entry in the provider portal and confirm submission status.
- Review claim detail information to ensure the correct data has been submitted.
- Maintain a history of submitted claims.

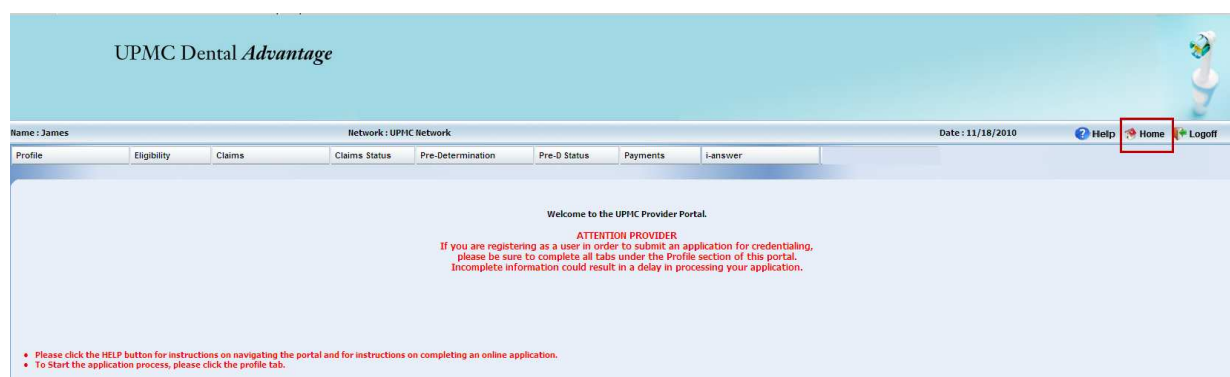
Claim List

Dental OnLine provides the ability to submit claims via direct web entry using the Internet. Once a claim has been submitted, Dental OnLine also provides the user with functionality that lists and displays all claims that have been submitted through the online portal.

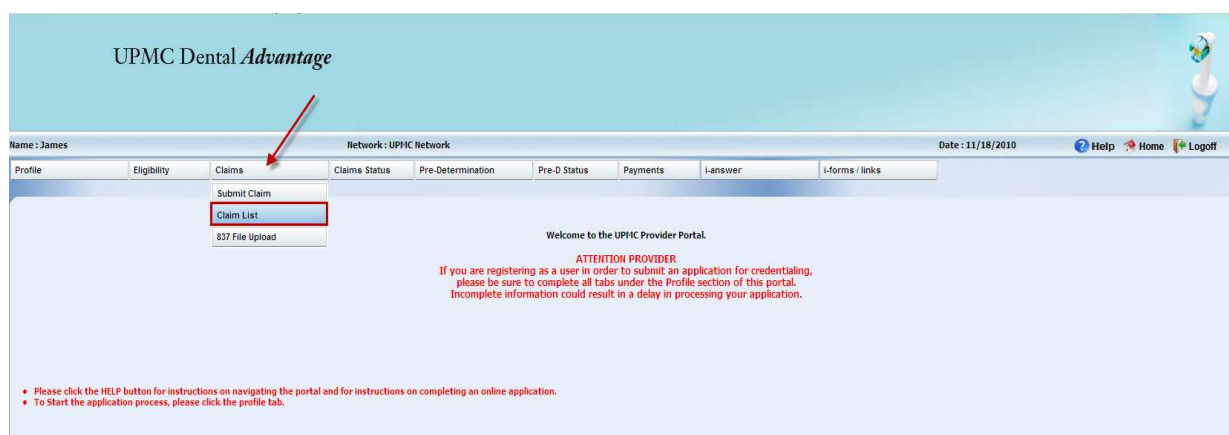
The Claim List function is found under the **Claims** tab on the home screen of Dental OnLine, and will allow the user to view all claims that have been submitted (history) displaying the following data:

- The date submitted
- The patient's name
- The submission status of the claim

This is the **Home Screen** to which the user can return at anytime during navigation by clicking on the **Home** button.



To begin review of submitted claims, place the cursor over the **Claims** tab and click on **Claim List** when it appears in the drop-down list.



Clicking on the **Claim List** button opens the list of claims that have been submitted by the dentist's billing office, most recently submitted claims at the top of the list by default. This is referred to as an open search.

UPMC Dental *Advantage*

Name : James Network : UPMC Network Date : 11/18/2010 Help Home Logoff

Profile Eligibility Claims Claims Status Pre-Determination Pre-D Status Payments I-answer

Submit Claim

Claim List

Online Claim List 837 File Upload Hide Criteria Reset

Date From Date To Patient Last Name Patient First Name

Total Records: 10 Page No: 1/1 Search

Action	Date Submitted	Patient Name	Status
View	11/08/2010	LIGHT, CRYSTAL	Submitted
View	11/08/2010	SMITH, BETH	Submitted
View	10/28/2010	LIGHTHALL, MATTHEW L	Submitted
View	10/28/2010	WONDER, DUSTIN	Submitted
View	10/28/2010	WONDER, JERMAINE	Submitted
View	10/28/2010	WONDER, STACEY	Submitted

Dental OnLine provides the user with the ability to refine the search and narrow the results as described here:

- Enter a submitted date range by populating the **Date From** and **Date To** fields using the calendar icon.

OR

- Enter the **Patient Last Name** and/or **Patient First Name** in the respective search field.
- Click on the **Search** button after the pertinent information has been populated in the search field(s).

It is important to note that not all fields have to be populated to initiate a search. Dental OnLine allows the user to choose one or multiple fields on which a search can be performed. Claims submitted for Joseph Smith can be viewed by entering **Smith** or **Smi** in the **Patient Last Name** field.

UPMC Dental *Advantage*

Name : James Network : UPMC Network Date : 11/18/2010 Help Home Logoff

Profile Eligibility Claims Claims Status Pre-Determination Pre-D Status Payments I-answer

Submit Claim

Claim List

Online Claim List 837 File Upload Hide Criteria Reset

Date From Date To Patient Last Name Patient First Name

Total Records: 10 Page No: 1/1 Search

Action	Date Submitted	Patient Name	Status
View	11/08/2010	LIGHT, CRYSTAL	Submitted
View	11/08/2010	SMITH, BETH	Submitted
View	10/28/2010	LIGHTHALL, MATTHEW L	Submitted
View	10/28/2010	WONDER, DUSTIN	Submitted
View	10/28/2010	WONDER, JERMAINE	Submitted
View	10/28/2010	WONDER, STACEY	Submitted

Click on the magnifying glass of the claim that you would like view.

UPMC Dental Advantage

Name : James Network : UPMC Network Date : 11/18/2010 Help Home Logoff

Profile Eligibility Claims Claims Status Pre-Determination Pre-D Status Payments Answer

Submit Claim Claim List

Online Claim List 837 File Upload Hide Criteria Reset

Date From Date To Patient Last Name Patient First Name Search

Total Records: 10 Page No: 1/1

Action	Date Submitted	Patient Name	Status
	11/08/2010	LIGHT, CRYSTAL	Submitted
	11/08/2010	SMITH, BETH	Submitted
	10/28/2010	LIGHTHALL, MATTHEW L	Submitted
	10/28/2010	WONDER, DUSTIN	Submitted
	10/28/2010	WONDER, JERMAINE	Submitted
	10/28/2010	WONDER, STACEY	Submitted

This is the **View** screen which shows the details of the submitted claim. The only available user actions on this screen are:

- Click on the **Procedure Code** at the lower left portion of the screen to see a description of the procedure code entered on the claim for the service performed on this patient (1). Once the description is displayed, click **Close** to close the pop-up window.
- Click on the **Go Back** button when review of the claims detail has been completed (2).

UPMC Dental Advantage

Name : Arsenio Network : UPMC Network Date : 11/18/2010 Help Home Logoff

Profile Eligibility Claims Claims Status Pre-Determination Pre-D Status Payments Answer i-forms / links

Claim Details Go Back 3

Claim Type D
Subscriber SSN 444-25-2222
Patient DOB 07/01/1974
Gender F
Patient Account # S2402
Appliance/branding date
Remaining Months of Treatment
Prior Placement Date
Tax ID 777889999
Address2
City Beaver Falls
Zip Suite 600
Billing provider name/organization name JD Dental
Serving provider first name James
Serving provider last name Bonded
P/WK

Patient Name WONDER, STACEY
Member # 000000024-02
Relationship Code SPOUSE
Orthodontia No
Total Months of Treatment
Replacement of prosthesis No

D0120
PERIODIC ORAL EVALUATION ESTABLISHED PATIENT
Close 2

Diagnosis Code MIS DX
Attachment Type

Date of Service	Procedure Code	Tooth #/Modifier	Tooth Surface	Quad/Arch	Quantity/units	Diagnosis pointer	Charge Amount
10/11/2010	D0120 1			00	1	1	50.00
10/11/2010	D4910			00	1	1	165.00
Totals					2	2	215.00

Uploading an Electronic Claims File

In this chapter, the user will learn how to:

- Upload/submit a HIPAA-compliant 837D claims/Pre-Determination file.
- Check the list of submitted files.

Uploading an 837D File

The 837D file can be submitted if the office/practice billing software has the capability to create a HIPAA-compliant 837 transaction file. This file can be used to submit actual claims, or it can be used to submit pre-determinations. The benefit of submitting an 837D file for either of these transactions is a decrease in turnaround time for adjudication of the claim or pre-determination. Electronic transactions have been proven to expedite the reimbursement request process, enabling the practice to receive claim determinations more rapidly.

In order to be able to submit an 837D transactional file, the submitter must complete a successful test cycle with the UPMC Dental *Advantage* EDI support team to ensure accurate placement of data in these files. In order to do this, the submitter needs to contact us via e-mail at HPEDINOTIFY@upmc.edu to set up the testing cycle.

The following functionality will be used for the submission of claims and pre-determinations:

- 1) Place the cursor over the **Claims** tab and the three options available will be visible.
- 2) Click on the **837 File Upload** option to view a listing of previous submissions.
- 3) To find a specific file that has already been submitted, the user can refine the results by entering a specific date in the **Creation Date** field.
- 4) After entering the **Creation Date**, click on the **Search** button.
- 5) To submit/upload a new 837D claims/pre-determination file, click on the **Add** button.

UPMC Dental *Advantage*

Name : Arsenio Network : UPMC Network Date : 11/09/2010 Help Home Logoff

Profile Eligibility **Claims** Claims Status Pre-Determination Pre-D Status Payments i-answer

Submit Claim
Claim List
837 File Upload

837 File upload List Hide Criteria Reset **Add**

Creation Date **Search**

Total Records: 4 Page No: 1/1

File Name	Display Name	Document Type	Creation Date
Group_20100707150704.txt	group	837 Files	11/08/2010
Group_20100707150704.txt	test	837 Files	11/08/2010
Portal Test2.txt	102710 Claims	837 Files	10/27/2010
Portal Test.txt	test.dat	837 Files	10/27/2010

Once the **Add** button has been clicked, the user is directed to the **Add or Remove** screen.

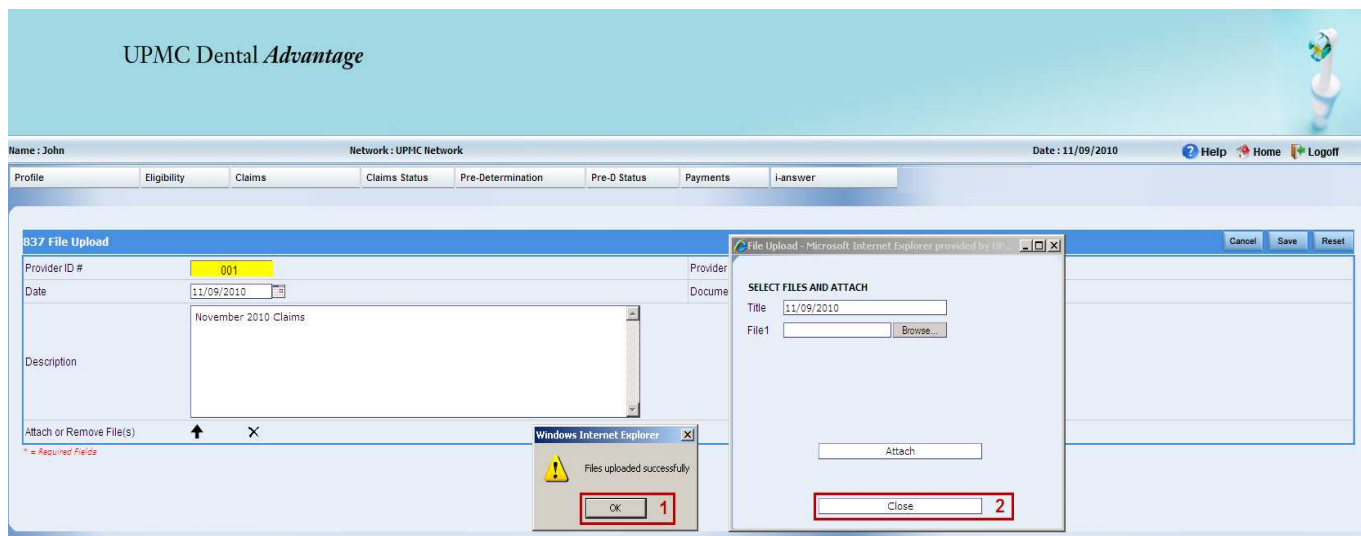
The following numbered instructions will guide the user through the process of adding an electronic file for submission:

- 1) To attach a new file, click on the upward-pointing arrow that appears on the screen. The user is then prompted to enter some transaction information.
- 2) Enter a description that helps to identify the transaction.
- 3) In the **Select Files and Attach** pop-up window, enter the Title (name the file) using a simple naming convention (one that is meaningful to the user), but be consistent with the type of files submitted (recommended file type or extension is .TXT format). This creates ease of use for ongoing identification among submissions; Title is a required field.
- 4) Click **Browse** to find a file that is stored in the submission software or common folder that may have been created according to the submitting office procedures.
- 5) When the user is satisfied the correct file has been selected and is visible in the **File 1** field, click on the **Attach** button. The user can now click on the **Close** button.

The screenshot displays the UPMC Dental Advantage web application interface. At the top, the header shows 'UPMC Dental Advantage' and a user profile for 'John' with the date '11/09/2010'. Below the header is a navigation bar with tabs: Profile, Eligibility, Claims, Claims Status, Pre-Determination, Pre-D Status, Payments, and i-answer. The main content area is titled '837 File Upload'. It contains fields for 'Provider ID #' (001), 'Date' (11/09/2010), 'Provider Name', 'Document Type', and 'Description'. A red box labeled '1' highlights an upward-pointing arrow icon in the 'Attach or Remove File(s)' section. A red box labeled '2' highlights the 'November 2010 Claims' text in the 'Description' field. A pop-up window titled 'SELECT FILES AND ATTACH' is open, showing a 'Title' field with '11/09/2010' (labeled '3'), a 'File 1' field with a 'Browse...' button (labeled '4'), and an 'Attach' button (labeled '5'). The pop-up also has 'Cancel', 'Save', and 'Reset' buttons at the top right.

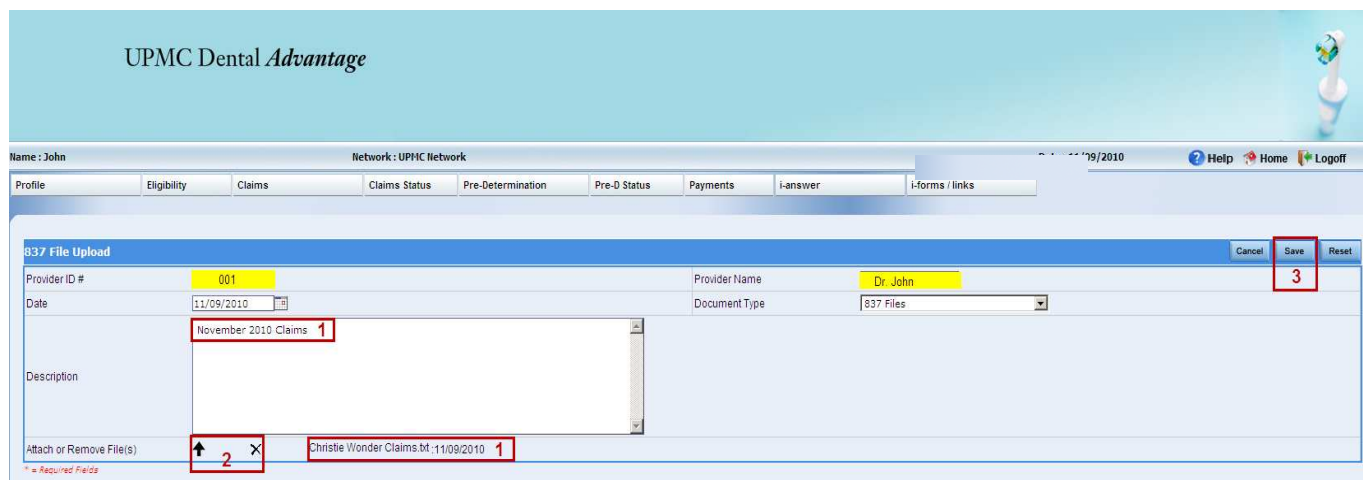
The file has been successfully uploaded and submitted to UPMC Dental *Advantage*. Now that the claims/pre-determination file has been attached and uploaded, the following actions are required to complete the transaction:

- 1) A pop-up box will appear stating **Files Uploaded Successfully**. Click the **OK** button.
- 2) Click the **Close** button as the final step.



There is still functionality available in the event claims submission is not complete. Here are the options that the user can perform, depending on the next task the user wants to perform. After closing the **File Upload Box**, the user can upload additional files, remove a file just entered during this session, or **Save** to exit the upload session as demonstrated below.

- 1) The **Description**, file type, and file name are visible for a user to ensure that the correct information/data has been uploaded.
- 2) If the user wants to add an additional file to this upload, the arrow would be selected again, and the process from above should be repeated to attach the additional files. If, after review of the screen, it is determined that an error in data entry or file attachment has been made, or a change is necessary, the **"X"** can be selected to remove the file.
- 3) If no more action is required and tasks are complete, click the **Save** button and the file will appear on the list.



The file that has just been loaded is now shown in the **File Name** list with the name entered during the upload process. The fields **File Name** and **Display Name** are user entered, while the **Document Type** and **Creation Date** are assigned by the system.

The screenshot displays the UPMC Dental Advantage web application. At the top, the header shows 'UPMC Dental Advantage' and a user profile icon. Below the header, a navigation bar includes 'Name : John', 'Network : UPMC Network', and a date 'Date : 11/09/2010'. A series of tabs are visible: Profile, Eligibility, Claims, Claims Status, Pre-Determination, Pre-D Status, Payments, and I-answer. The main content area is titled '837 File upload List' and includes a 'Creation Date' search field. Below this, it shows 'Total Records: 10' and 'Page No: 1/1'. A table with four columns is displayed: File Name, Display Name, Document Type, and Creation Date. The table contains one row of data.

File Name	Display Name	Document Type	Creation Date
Christie Wonder Claims.txt	11/09/2010	837 Files	11/09/2010

Submitting a Pre-Determination

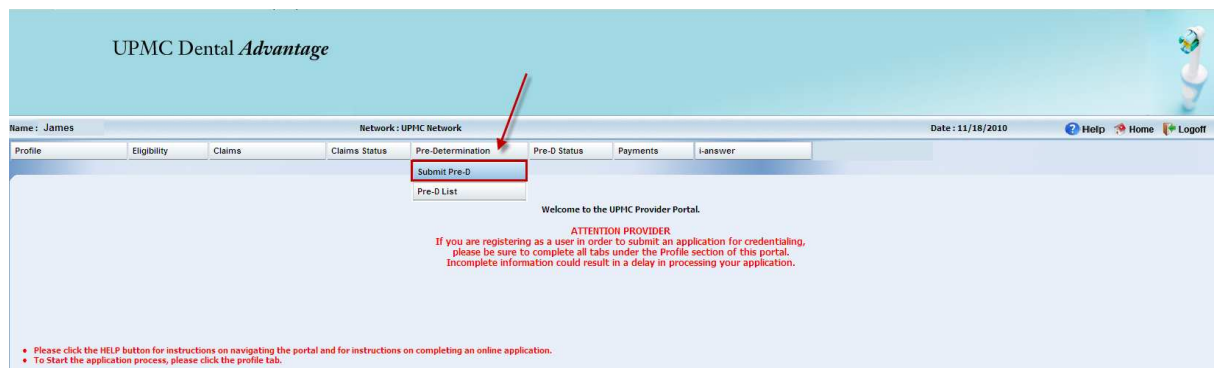
In this chapter the user will learn:

- How to select the correct subscriber or member.
- The population of all required data fields.
- What fields will be auto-populated by entering data in the first required fields.
- The mechanisms that are available to select proper coding of services rendered.
- To correct data before finalizing a pre-determination submission.
- How to verify the completion of a submitted pre-determination.

This chapter demonstrates the thorough steps required to submit a UPMC Dental *Advantage* Pre-Determination (Pre-D). It is always recommended that a Pre-D is submitted prior to scheduling services, especially for services exceeding \$250.00.

To begin the submission process for a pre-determination

- Place the cursor over the **Pre-Determination** button to make the drop-down selections visible.
- Click on **Submit Pre-D** to open the pre-determination entry screen.



There are two paths a user can choose to select a patient from the drop-down menu.

- Subscriber Social Security Number (SSN) or
- Member Contract Number**

Navigation across the claim entry screen is best done by utilizing the **Tab** key on the keyboard and traveling left to right. We do not recommend utilizing the computer's mouse, as this may bypass a required field that will initiate a prompt to return to that field and populate the necessary information. Once the patient is correctly identified, either method will initiate auto-population of the remaining necessary demographic fields.

The **Search By** field is automatically defaulted to the **Subscriber SSN (1)** option. When this is the selected method of submission, the user will manually enter the SSN(2) in the field. When the user tabs to the next field after entry in field 2, the system will auto-populate:

- **Member Name**
- **Patient First Name**
- **Patient Last Name**
- **Patient DOB (Date of Birth)**
- **Member #**
- **Gender**
- **Relationship Code**

UPMC Dental Advantage

Name: James Network: UPHC Network Date: 11/18/2010 Help Home Logoff

Profile Eligibility Claims Claims Status Pre-Determination Pre-D Status Payments I-answer I-forms / links

Submit Pre-Determination - Header

Claim Type P

Search By Subscriber SSN 1

Member Name WONDER, JERMAINE

Patient First Name JERMAINE

Patient Last Name WONDER

Patient DOB 08/01/1975

Member # 000000024-01

Gender M

Relationship Code SUBSCRIBER

Orthodontia

Cancel Save Reset

In this example, the **Member Contract #** was selected in the **Search By** drop-down field (1) and the 9-digit subscriber number was input (2) after tabbing over.

UPMC Dental Advantage

Name: James Network: UPMC Network Date: 11/18/2010 Help Home Logoff

Profile Eligibility Claims Claims Status Pre-Determination Pre-D Status Payments i-answer

Submit Pre-Determination - Header Cancel Save Reset

Claim Type P

Search By Member Contract # 1

Member Contract # 000000024 2

Member Name WONDER, JERMAINE

Patient First Name

Patient Last Name

Patient Middle Name

Patient DOB

Gender

Patient Account #

Orthodontia ☐

The next illustration shows how to select the actual patient from the member name drop-down list. It is important to select the member name on each claim submission. To do this, click on the drop-down arrow of the member name field and the additional eligible member names attached to the subscriber's policy will be visible (1). For this demonstration, Stacey, the spouse, will be selected (2) and her information will be populated.

UPMC Dental Advantage

Name: James Network: UPMC Network Date: 11/18/2010 Help Home Logoff

Profile Eligibility Claims Claims Status Pre-Determination Pre-D Status Payments i-answer

Submit Pre-Determination - Header Cancel Save Reset

Claim Type P

Search By Member Contract #

Member Contract # 000000024

Member Name WONDER, JERMAINE 1

Member Name WONDER, STACEY 2

Patient First Name JERMAINE

Patient Last Name WONDER

Patient Middle Name

Patient DOB 08/01/1975

Gender M

Patient Account #

Relationship Code SUBSCRIBER

Orthodontia ☐

The Pre-Determination Entry Screen

UPMC Dental Advantage

Name: James Network: UPMC Network Date: 11/09/2010 Help Home Logout

Profile Eligibility Claims Claims Status Pre-Determination Pre-D Status Payments I-answer

Submit Pre-Determination - Header

Claim Type P

Search By Subscriber # 000000024

Member Name WONDER, STACEY Patient First Name STACEY

Patient Middle Name WONDER Patient Last Name WONDER

Patient DOB 07/01/1974 Member # 000000024-02

Gender F Relationship Code SPOUSE

Patient Account # 1

Orthodontia 2

Replacement of prosthesis 3

Location ID # / Name 4 Tax ID 5

Address1 5 Address2 5

Address3 5 City 5

State 5 Zip 5

Group NPI # 5 Billing provider name/organization name 5

Billing provider first name 6 James Servicing provider first name 6 James

Servicing Provider NPI # 6 1234567890 Servicing provider last name 6 Bonded

Diagnosis Code 6 9999.9

Submit Pre-Determination - Detail

Procedure Code 8 Tooth #/Modifier 9 Tooth Surface 10 Quad/Arch 11 Quantity/units 12 Diagnosis pointer 13 Charge Amount 14 Add 15

The subscriber's spouse has been populated with her information. The remaining fields to complete a successful pre-d submission are listed below.

- 1) **Patient Account Number** – not required but helpful in correspondence and office record keeping
- 2) **Orthodontia** – this requires a check mark if services are orthodontia-related. These additional fields require information to be entered:
 - a) Appliance/Banding Date
 - b) Total Months of Treatment
 - c) Remaining Months of Treatment
- 3) **Replacement of Prosthesis** – this requires being checked if it is relative to the listed service and the **Prior Placement Date** will need added.
- 4) **Location ID #/Name** – The notepad to the right of the field is incorporated for the user to select the place of service from a multiple location practice. By selecting the location, it will auto-populate the dentist's location demographics. The following actions will complete the location selection process:

- **Filter By** would be used by large corporate practices with many locations. (1)
- **Description** is the same as **Location Name** if searching many locations. (2)
- **Search** is used when filtering is used or **Description** added. (3) (In this case it wasn't necessary because only two locations exist.)
- **Location Code** is clicked for the desired location. (4)

LOV - Microsoft Internet Explorer provided by UPMC

Location Look Up Hide Criteria Reset

Filter By All 1 Description 2

Total Records: 2 Page No: 1/1 Search 3

Location Code	Location Name	Location Address	Practice TaxID
823 4	JD Dental	JD Dental 616 Toni Ave Suite 600 Beaver Falls, PA 15010	777889999
824	Pearly Grill Main Office	Pearly Grill Main Office 121 Main St New Brighton, PA 15066	777889999

- 5) All data fields designated with the number (5) on the illustration will populate upon selecting the **Location #/Name** if that information is appropriate and on file for the dentist.
- 6) All data fields designated by the number (6) are auto-populated based on the user log-on.
- 7) **PWK** –this stands for paperwork and is required to be populated with the letters (EB) when the patient has other dental insurance coverage that is the primary payer.
- 8) **Procedure Code** – the procedure code can be manually entered if known and tabbing to the next field will populate the description or utilizing the notepad icon to the right of this field will bring up a complete list of codes for viewing and selection to be populated.
 - Filter by **CDT CODE** and put a partial code in **Description**. Click the **Search** button.
 - Filter by **CDT Description** and put in a partial description (ex. filling).
 - Click on **Code** of desired procedure to populate the form. That will automatically close the pop-up box.

LOV - Microsoft Internet Explorer provided by UPMC

Procedure Code Lookup Hide Criteria Reset

Filter By: Description:

Total Records: 81 Page No: 1 / 1 Search

Records Per Page: 81 Go to page: 1

D2810	RECEMENT INLAY ONLAY/PART COVERAGE RESTORATION
D2815	RECEMENT CAST OR PREFABRICATED POST AND CORE
D2820	RECEMENT CROWN
D2830	PREFABR STAINLESS STEEL CROWN - PRIMARY TOOTH
D2831	PREFABR STAINLESS STEEL CROWN - PERMANENT TOOTH
D2832	PREFABRICATED RESIN CROWN
D2833	PREFABR STAINLESS STEEL CROWN W/RESIN WINDOW
D2834	PREFAB ESTHETIC COAT STNLESS STEEL CROWN PRIM
D2840	SEDATIVE FILLING
D2850	CORE BUILDUP INCLUDING ANY PINS
D2851	PIN RETENTION - PER TOOTH ADDITION RESTORATION
D2852	POST AND CORE ADDITION TO CROWN INDIRECTLY FAB
D2853	EACH ADDITIONAL INDIRECTLY FAB POST SAME TOOTH
D2854	PREFABRICATED POST AND CORE IN

9) **Tooth number** can be manually entered if known or utilize the notepad icon to the right of the field to initiate a look-up box.

- Filter by **Tooth Code** or **Description**.
- Enter the corresponding information in the **Description** field.
- Click the **Search** button.
- Click on the desired tooth number as shown and the look-up box will close automatically and populate the form.

10) **Tooth surface** can be populated by utilizing the notepad icon to the right of the field to initiate a look-up box.

- Click the box to the left of the desired tooth surface.
- Click **Save** and the look-up box will automatically close and populate the form.

11) **Quad/Arch** – the quadrant or arch can be populated by utilizing the notepad icon to the right of the field to initiate a look-up box.

- Click in the box to the left of the desired **Quad Name**.
- Click on the **Save** button.
- The box will automatically close and populate the form.

LOV - Microsoft Internet Explorer provided by UPMC

Quad/Arch List Save

Total Records: 19 Page No: 1/1

<input type="checkbox"/> Select All	Quad Code	Quad Name
<input type="checkbox"/>	00	ENTIRE ORAL CAVITY
<input type="checkbox"/>	01	MAXILLARY ARCH
<input type="checkbox"/>	02	MANDIBULAR ARCH
<input type="checkbox"/>	03	UPPER RIGHT SEXTANT
<input type="checkbox"/>	04	UPPER ANTERIOR
<input type="checkbox"/>	05	UPPER LEFT SEXTANT
<input type="checkbox"/>	06	LOWER LEFT SEXTANT
<input type="checkbox"/>	07	LOWER ANTERIOR
<input type="checkbox"/>	08	LOWER RIGHT SEXTANT
<input type="checkbox"/>	10	UPPER RIGHT QUADRANT
<input type="checkbox"/>	20	UPPER LEFT QUADRANT
<input type="checkbox"/>	30	LOWER LEFT QUADRANT
<input type="checkbox"/>	40	LOWER RIGHT QUADRANT
<input type="checkbox"/>	LA	LOWER ANTERIOR
<input type="checkbox"/>	LL	LOWER LEFT
<input checked="" type="checkbox"/>	LR	LOWER RIGHT
<input type="checkbox"/>	UA	UPPER ANTERIOR
<input type="checkbox"/>	UL	UPPER LEFT
<input type="checkbox"/>	UR	UPPER RIGHT

12) **Quantity/units** field is auto-populated with 1 unit. The user can change the number and add additional units if it is appropriate for the procedure submitted.

13) **Diagnosis Pointer** field is auto-populated with one unit and is appropriate to be submitted for a single service.

14) **Charge Amount** – amount charged for the service

15) Click on the **Add** button to add the service line to the claim. The process will be repeated for all additional services submitted.

16) The user will be able to:

- **Save** the form if satisfied with all the data elements.
- **Reset** the form to begin again.
- **Cancel** to terminate the pre-determination submission.

The completed form is illustrated next with the added service line at the very bottom. Additional service lines will be populated below this line with totals for the forms and charge amounts.

UPMC Dental Advantage

Name: James Network: UPMC Network Date: 11/09/2010 Help Home Logout

Profile Eligibility Claims Claims Status Pre-Determination Pre-D Status Payments Answer

Submit Pre-Determination - Header Cancel Save Reset

Claim Type P 16

Search By Subscriber # 000000024

Member Name Patient First Name STACEY

Patient Middle Name Patient Last Name WONDER

Patient DOB 07/01/1974 Member # 000000024-02

Gender F Relationship Code SPOUSE

Patient Account # 1

Orthodontia 2

Replacement of prosthesis 3

Location ID # / Name 4 823 JD Dental Tax ID 5 777889999

Address1 5 616 Toni Ave Address2 5 Suite 600

Address3 5 City 5 Beaver Falls

State 5 Pennsylvania Zip 5 15010

Group NPI # 5 Billing provider name/organization name 6 pearly grill

Billing provider first name 6 James Servicing provider first name 6 James

Servicing Provider NPI # 6 1234567890 Servicing provider last name 6 Bonded

Diagnosis Code 6 9999.9

Submit Pre-Determination - Detail

Procedure Code 8 Tooth #/Modifier 9 Tooth Surface 10 Quad/Arch 11 Quantity/units 12 Diagnosis pointer 13 Charge Amount 14 Add 15

Change	Delete	Procedure Code	Tooth #/Modifier	Tooth Surface	Quad/Arch	Quantity/units	Diagnosis pointer	Charge Amount
		D2940	11	O	LR	1	1	65.00

Viewing Pre-Determinations Entered Through Dental OnLine (Pre-D List)

In this chapter the user will learn:

- How to access all pre-determinations submitted through Dental OnLine (the portal).
- How to read the form.
- How to view the status of each entered pre-determination.
- How to view descriptions of submitted procedure codes on the form.

Pre-Determination List (Pre-D List)

The Pre-D List function provides the user with the ability to view all pre-determinations submitted through Dental OnLine and the submission status of those pre-determinations.

The available user actions are listed below with corresponding numbers on the screen image.

- 1) Click on **Pre-D List** (1) under the **Pre-Determination** tab; this option will appear when the cursor is placed over the tab; a list of all pre-determinations submitted by this specific user will be populated.
- 2) To narrow the list of pre-determinations to find specific ones, the user can click **Reset** (2) to clear the screen and new search criteria can be entered.
- 3) The user can refine the search by entering specific **Date From** (3) and **Date To** (3), utilizing the calendar icons available to the right of each date box (these are submission dates).
- 4) The user can also enter the **Patient Last Name** (4) and **Patient First Name** (4).
- 5) Click the **Search** (5) button to initiate the search of records.
- 6) Select the desired pre-determination record by clicking on the magnifying glass (6) in the **View** column.

The user actions available are:

- 1) Click on the **Notepad** icon (1) to open a pop-up window that displays a description of the procedure code submitted.
- 2) View the **Procedure Code Description** (2); click **Close** to return to the **Details** screen.
- 3) Click the **Go Back** button to return to the search results (3).

Checking a Pre-Determination Status **(Pre-D Status)**

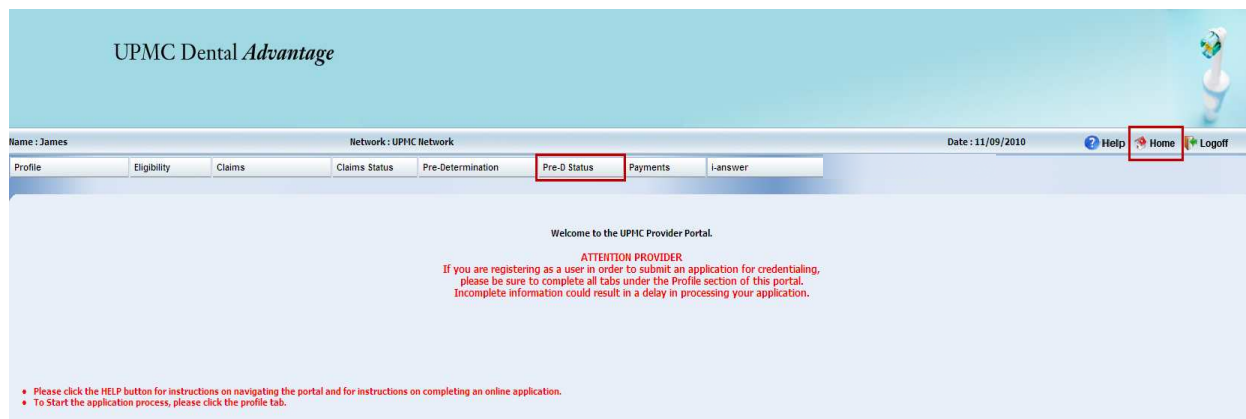
In this chapter, the user will learn how to:

- Search for the desired pre-determination to view.
- Check on submitted services for exact amounts that will be pre-determined for disbursement to the providers or assigned as a patient responsibility.
- Interpret the Explanation of Payment.

**Pre-Determinations do not guarantee payment.*

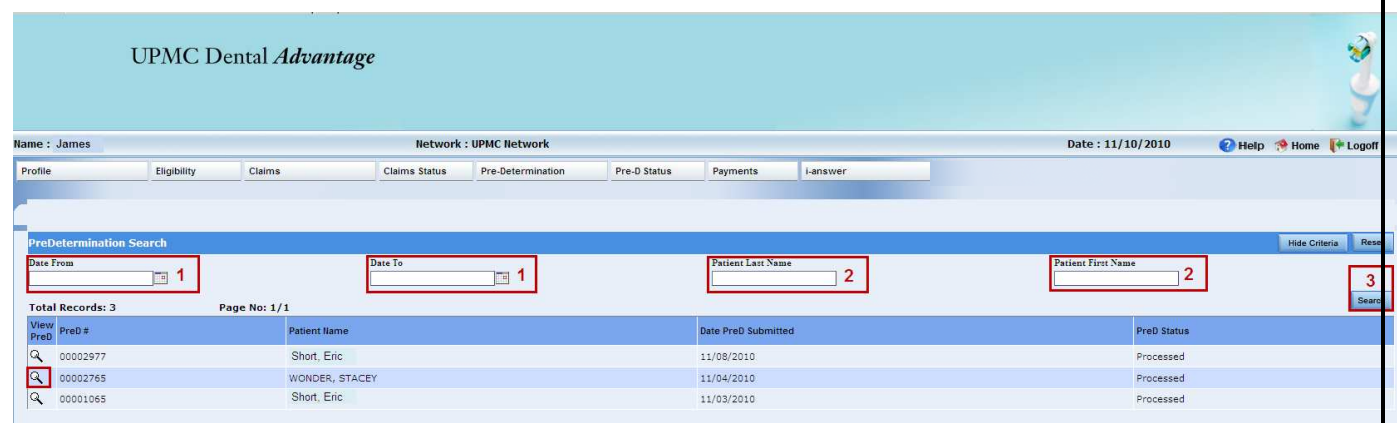
Pre-D Status

The pre-determination will inform both the member and dentist how the submitted service will be processed. From the Home Page, click on the **Pre-D Status** tab to check the status of a submitted pre-determination (Pre-D).



To refine the search of submitted pre-determinations:

- Enter **Date From** and **Date To** dates using the calendar icon (1) or
- Enter **Patient Last Name** and **Patient First Name** (2).
- Click on the **Search** button after the required information has been entered.
- To view the selected pre-determination, click on the magnifying glass under the **View Pre-D** column.



Each pre-determination will have a PreD status. The status codes are:

Submitted and Processed

Submitted will show as the PreD status as soon as the Pre-D is submitted to UPMC Dental Advantage and will continue to stay in this status until it is fully processed. UPMC Dental Advantage turnaround time is within 48 hours of submission. If you need assistance with your pre-determination status, please contact the Dental Benefits Advisory Team at 1-877-648-9609.

Once the Pre-D is processed, the Pre-D status will change to **Processed**. **Processed** indicates that the Pre-D is ready to be viewed. The user can click on the **View Pre-D** magnifying glass to view a copy of the pre-determination once the status is shown as processed.

The example above shows the submission has been processed.

Below is an example of the explanation of pre-determination that appears when the pre-determination is in the processed status. The following user actions are available:

- To return to the search results, use the **Click here to go back** button.
- To navigate across multiple pages, click on the forward and back arrows.
- To increase the size of the view, click on the arrow next to 100% for a drop-down menu of size options.
- If the drop-down arrow is selected for **Select a format**, the EOP can be converted to a Microsoft Excel or Adobe Acrobat document for exporting or printing.

Click here to go back

1 of 1
100%
Find | Next
Select a format
Export

PREDETERMINATION
NOTIFICATION
KEEP FOR YOUR TAX RECORDS

UPMC Dental/Vision Advantage
112 Washington Place,
Pittsburgh, PA 15219

Subscriber : WONDER, JERMAINE
ID Number : 00000002402
Page : 1 of 1
Patient : WONDER, STACEY
Claim Number : 00002765
Date : 11/10/2010
Provider : Bonded Dental
PREDETERMINATION VALID THROUGH : 05/03/2011

PROCEDURE DESCRIPTION PROCEDURE CODE *TOOTH DESCRIPTION*	NUM OF SERV	PROVIDER'S CHARGE	ALLOWANCE	APPROVED AMOUNT	COPAY AMOUNT	DED AMOUNT	AMOUNT NOT APPROVED	REMARK(S)
D2940 SEDATIVE FILLING	1	134.00	65.00	65.00	32.50	32.50		OA
			TOTALS	65.00	32.50	32.50		

OA PAID AT CONTRACTED RATE - DO NOT BILL MEMBER

The approved amount is subject to the terms of the beneficiary's coverage in effect on the date of receipt and may change if the contract or the proposed treatment plan changes. The amount paid may be less than shown if benefits are payable under another plan which is primary.

Any personally identifiable health information about the member enrolled dependents is protected by the Health Insurance Portability and Accountability Act of 1996 and other laws. In accordance with those laws, UPMC may use and disclose Protected Health Information for treatment, payment and health care operations as described in its Notice of Privacy Practices. You can view and print a copy of our health insurance portability and accountability act of 1996 (HIPAA) Notice of Privacy practices by visiting our website at www.upmchealthplan.com and clicking on HIPAA Privacy Notice button or by calling Member Services (for Members) and Provider Services (for Providers) to request a paper copy.

If you are covered under more than one health benefit plan, you should file all your claims with each plan.

UPMC
UPMC Dental/Vision Advantage
112 Washington Place,
Pittsburgh, PA 15219

HAVE A DENTAL QUESTION ?
Member Please Call: 877-648-9640
Provider Please Call: 877-648-9609
Business Hours: 8am-5pm E.T.
Service for the hearing impaired via TTY is available at 1-800-361-2629

HAVE A VISION QUESTION ?
Member Please Call: 888-499-6914
Provider Please Call: 877-648-9621
Business Hours: 8am-5pm E.T.

THIS IS NOT A BILL

Predetermination Field Descriptions

Subscriber : WONDER, JERMAINE

ID Number : 00000002402

Page : 1 of 1

Patient : WONDER, STACEY

Claim Number : 00002765

Date : 11/10/2010

Provider : Bonded Dental

PREDETERMINATION VALID THROUGH : 05/03/2011

PROCEDURE DESCRIPTION PROCEDURE CODE *TOOTH DESCRIPTION*	NUM OF SERV	PROVIDER'S CHARGE	ALLOWANCE	APPROVED AMOUNT	COPAY AMOUNT	DED AMOUNT	AMOUNT NOT APPROVED	REMARK(S)
D2940 SEDATIVE FILLING	1	134.00	65.00	65.00	32.50	32.50		OA
			TOTALS	65.00	32.50	32.50		

OA

PAID AT CONTRACTED RATE - DO NOT BILL MEMBER

The approved amount is subject to the terms of the beneficiary's coverage in effect on the date of receipt and may change if the contract or the proposed treatment plan changes. The amount paid may be less than shown if benefits are payable under another plan which is primary.

The fields from left to right are:

- 1) **Procedure Description, Procedure Code *Tooth Description*** – The exact codes submitted are listed with their corresponding descriptions.
- 2) **Num of Serv** – The number of services submitted for each corresponding submitted code is listed.
- 3) **Provider's Charge** – This field shows the billed amounts for the corresponding codes.
- 4) **Allowance** – This field will show the allowed amount per the contractual agreement with UPMC Dental *Advantage* for each corresponding service.
- 5) **Approved Amount** – This amount represents what is approved for payment for each corresponding service.
- 6) **Copay Amount** – This amount represents the patient copayment for the corresponding services. It will be the difference between the allowed amount and the approved amount.
- 7) **Ded Amount** – This field is populated with an amount applied to the individuals plan deductible if it has not yet been satisfied for the benefit year. If it has not been satisfied, the approved amount will be represented here instead of in its field until that deductible has been met.

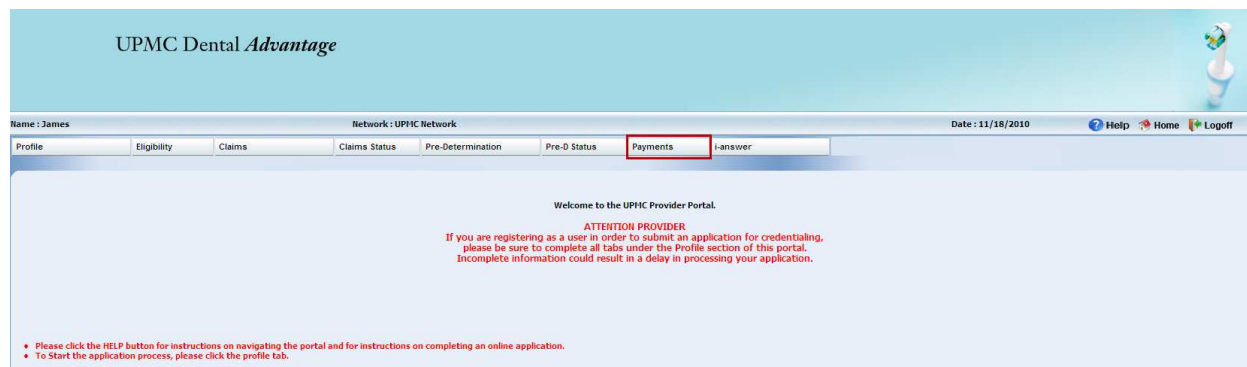
Payments

In this chapter, the user will learn how to:

- View and research payment information made to the provider on behalf of the member/patient, including claim and check information.
- Produce an electronic Explanation of Payments document that can be printed or saved electronically.

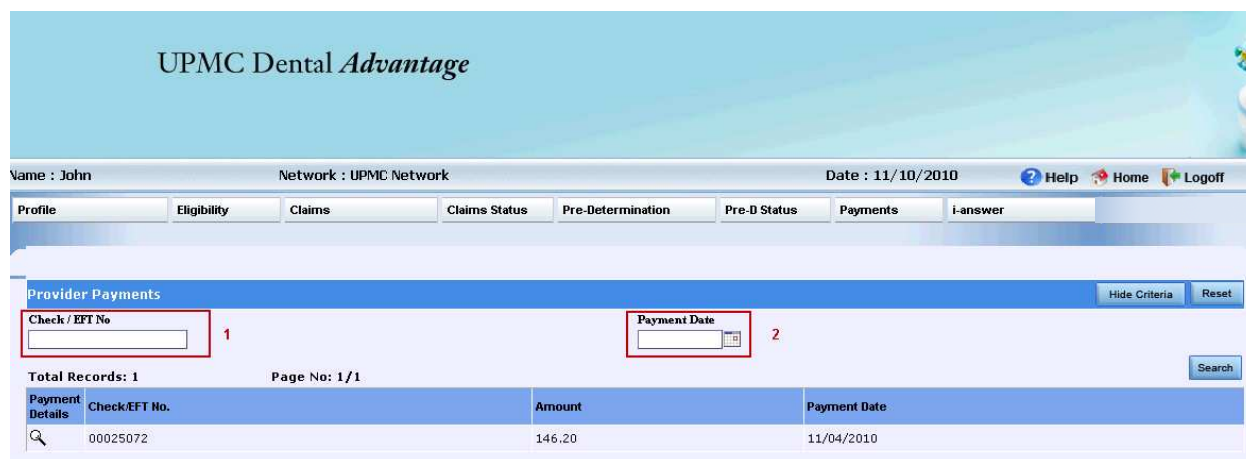
Payments

From the **Home Screen**, click on the **Payments** tab to view payments/claim determinations that have been processed.



The user can now review payments made based on claims submitted, but the default list of payments displayed includes all payments processed for this provider. Dental OnLine provides the user with the ability to refine the search to yield more defined, specific results. This can be accomplished by using the following search tools:

- 1) The search can be refined by entering the **Check/EFT No.**, **Payment Date**, or the patient name.
- 2) Click on the **Search** button after the search criteria have been entered in the selected field(s). The more data that is entered the more refined the search results will be.



Click on the magnifying glass in the **Payment Details** column that the billing office staff wants to review.

The screenshot shows the UPMC Dental Advantage web interface. At the top, the header includes the logo and navigation links like 'Help', 'Home', and 'Logout'. Below the header, there's a navigation bar with tabs: 'Profile', 'Eligibility', 'Claims', 'Claims Status', 'Pre-Determination', 'Pre-D Status', 'Payments', 'i-answer', and 'i-forms / links'. The 'Payments' tab is selected. Under the 'Payments' tab, there's a section for 'Provider Payments' with a search bar for 'Check / EFT No.' and a date selector for 'Payment Date'. Below this, a table shows 'Total Records: 1' and 'Page No: 1/1'. The table has columns: 'Payment Details', 'Check/EFT No.', 'Amount', and 'Payment Date'. The first row shows a check number '00025072' with an amount of '146.20' and a payment date of '11/04/2010'. A magnifying glass icon is highlighted in the 'Payment Details' column.

The result of clicking on the magnifying glass is the creation of an Explanation of Payment (EOP), which is a report of all claims processed on that particular payables run/check number that was selected for review.

- The EOP provides detail by patient by claim. Each EOP provides cumulative totals that will match the total amount of the check or electronic payment, labeled **EOP Totals**.
- Navigation through multiple page EOPs can be accomplished by clicking the directional arrows located under the **Click here to go back** button.
- The EOP can be enlarged for easier viewing by using the drop-down arrow and selecting a size greater than 100%.
- In addition to printing the EOP by using the printer icon, the office staff can elect to save the report in either an Excel or Acrobat (PDF) format. This provides a means for utilizing electronic storage of the EOP.

The screenshot shows the 'Explanation of Payments' report. At the top, there's a navigation bar with a 'Click here to go back' button, a zoom level of '100%', and a 'Find | Next' search bar. Below this, there's a table with columns: 'FIRST DATE OF SVC', 'LAST DATE OF SVC', 'SUM OF SVC', 'PROCEDURE CODE', 'TOOTH NUMBER/SURFACE', 'PROVIDER CHARGE', 'ALLOWANCE', 'NON CHG AMOUNT', 'NON CHG CODE', 'SUB LIA DEDUCT', 'SUB LIA COPY', 'SUB LIA CODE', 'OTHER INSURANCE AMOUNT', 'EOP DEDUCT', 'EOP COPY', 'AMOUNT(S) PAID TO SUBSCRIBER', 'MESSAGE(S) CODE', and 'CLAIM NUMBER'. The table shows data for a patient named 'SHORT, ERIC' with a claim number '00002777'. Below the table, there's a section for 'EOP TOTALS' showing 'TOTAL SUBSCRIBER PAYMENTS: 0.00', 'TOTAL PROVIDER PAYMENTS: 46.00', and 'CHECK NUMBER: 00000077'. At the bottom, there's a message: '0A PAID AT CONTRACTED RATE - DO NOT BILL MEMBER'.

When the review and printing/saving of the EOP is complete, the user can navigate back to the Payments List screen by clicking on the **Click here to go back** button.

Click here to go back

10/05/2010 10/05/2010 01110 7675.00 46.00 7629.00 CA 0.00 0.00 0.00 0.00 0.00 0.00 0A 00002777

EOP TOTALS : TOTAL SUBSCRIBER PAYMENTS : 0.00 TOTAL PROVIDER PAYMENTS : 46.00 CHECK NUMBER : 00000077

MESSAGE(S):

0A PAID AT CONTRACTED RATE - DO NOT BILL MEMBER

EXPLANATION OF PAYMENTS

Click the **Home** button to return to the **Home Screen**, or select another tab to perform additional tasks.

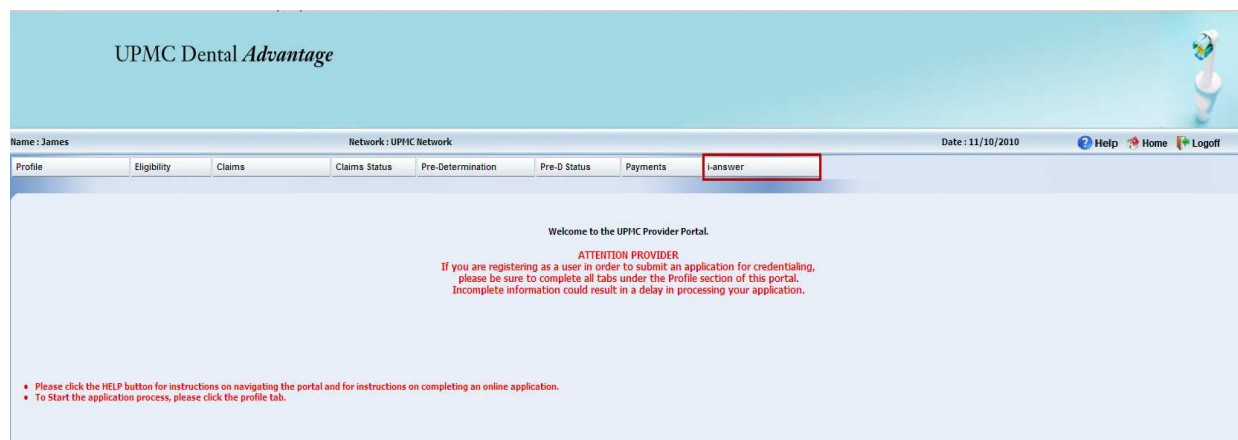
Using the i-answer Informational Tool

In this chapter, the user will learn how to:

- Access informational documents added regularly as an additional conduit to pass information on regarding:
 - Dental OnLine updates
 - Procedural information
 - Policies and Procedures
- Updates and Newsletters that will enhance service to UPMC Dental *Advantage* members and our network of dental providers.

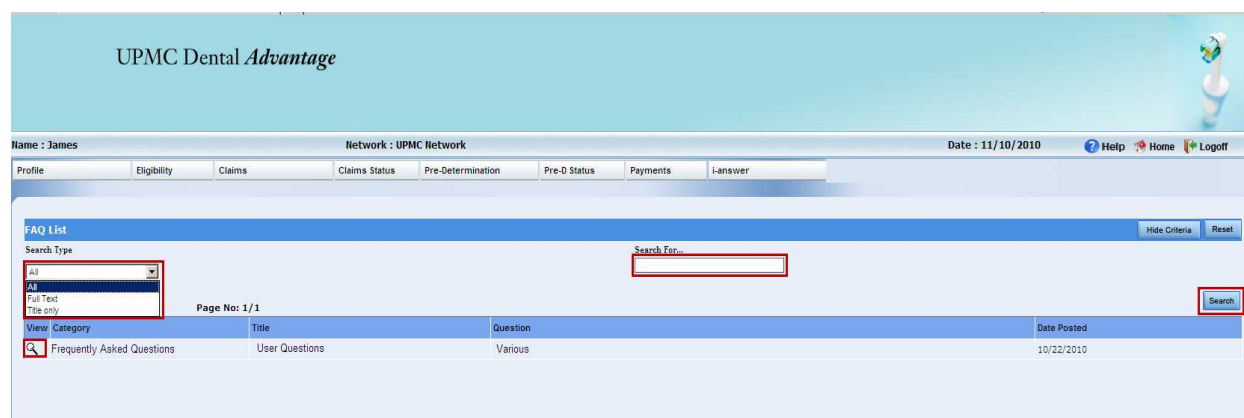
i-answer

The i-answer tab is a data repository in which UPMC Dental *Advantage* will upload communication and tools for our dental community to use in Dental OnLine.



UPMC Dental *Advantage* will regularly update this repository with pertinent information relating to:

- Frequently Asked Questions
- Contact Information
- UPMC Dental *Advantage* Policies and Procedures
- Newsletters
- User Concerns and Questions



Users can:

- Select the document type desired.
- Search by description.
- Click on the magnifying icon of the selected document.